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Jun 03 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morthain  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000016674 (9)

1. Corporation Name  
NATIONAL ELECTRONIC ATTACHMENT, INC.



Principal Place of Business

1479 SOUTH BELCHER ROAD  
UNIT 25  
DARGO FL 33701

Mailing Address

677 EXECUTIVE CENTER DR., WEST  
SUITE 303  
ST. PETERSBURG FL 33702-2474

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 1479 South Belcher Road

27 Suite, Apt. #, etc.

28 City & State

29 Zip Country

30 USA

3. Date Incorporated or Qualified

02/22/1996

3a. Date of Last Report

4. FEI Number

59-3399754

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

POWERS, JIKLL FISHER  
877 EXECUTIVE CENTER DRIVE WEST  
SUITE 202  
ST. PETERSBURG FL 33702

10. Name and Address of New Registered Agent

81 Name

JILL FISHER POWERS

82 Street Address (P.O. Box Number is Not Acceptable)

19353 US Hwy 19 N #100

83 City

Clearwater

84 State

FL

85 Zip Code

34610

11. Pursuant to the provisions of Sections 607.02 and 607.08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

4/24/97

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

CR2E034 (9/96)