## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P96000029130 (7)

AFFORDABLE ELECTRONICS SERVICES, INC.

PEMBROKE PINES FL 33024

Principal Place of Business 2100 N FEDERAL HIGHWAY HOLLYWOOD FL 33020		Mailing Address 2100 N FEDERAL HIGHWAY HOLLYWOOD FL 33020			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  03/28/1996	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number 65-0656055	Applied For Not Applicable
Suito, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional Fee Required
					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip <b>29</b>	30 Cou	intry	8. This corporation owes or has paid the currer Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent AREVALO, ARIEL					10. Name and Address of New Registered Ag	ent
2100 N FEDERAL HIGHWAY HOLLYWOOD FL 33020				82 Street Add 83 City	ress (P.O. Box Number is Not Acceptable)	85 Zip Code
11. Pursuant office or r agent. I s	to the provisions of Sections 607.0: registered agent, or both, in the Sta am familiar with, and accept the obl	502 and 607, 1508, Florida Statute of Horida Such change was igations of, Section 607,0505, F	utes, the a authorize lorida Stat	pove-named cor d by the corpora utes.	poration submits this statement for the purpose of chition's board of directors. I hereby accept the appoin	nanging its registered atment as registered
SIGNATURE	Signature, typod or printed name of registered a	agont and title if applicable (NC	III. Registere	d Agent signature requ	lred when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	D	DELETE		TLE		Change
NAME	AREVALO, ARIEL	· · · · · · · · · · · · · · · · · · ·		ME		ļ
STREET ADDRESS	DEMODOVE DIVIES EL 22024			REET ADDRESS		,
CITY-ST-ZIP	PEMBROKE PINES FL 33024		1.4 01	TY-ST-ZIP		
TITLE	D DELETE		2.1 T(	RE		Change
NAME	AREVALO, CECELIA		2.2 N/	ME .		
STREET ADORESS	8650 JOHNSON ST		2.3 \$1	REET ADDRESS		

2.3 STREET ADDRESS

3.3 STREET ADDRESS 3.4. CITY-ST-ZIP

4.3 STREET ADDRESS 4.4 CITY - ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

2 4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

51 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

DELETE

6.4 CITY-ST-ZIP 14. Thereby 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 ennual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee employee to be because the section of the corporation or the receiver or trustee employee to be section to be section to the receiver or trustee employees. In Block 12 or Block 13 if changed, or on an attachment without process.

SIGNATURE:

STREET ADORESS

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

NAME

CITY-ST-ZIP TITLE

TITLE

NAME

**FILED** 

Mar 12 1998 8:00am

Secretary of State

3-4-98 9NY 923-0543

Change

Change

Change

Change

\_\_\_ Addition

Addition

Addition

Addition