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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

SIGNATURE:

GETRONIC, /NC.

FILED
May 14 1997 8:00am
Secretary of State

INGETRONIC, /NC.					
Principal Plac	ce of Business	Mailing Address			
3501 INVERRARY BLVD.					
	TE 713				
	LAUDERDALE	、七、333	19	3. Date Incorporated or Qualified	3a. Dale of Last Report
	Place of Business	2a Mailing Address	, 10F27	4. FEI Number	Applied For
21	Al.		x 28537	65-0638 48 2	Not Applicable
Suite, Apt 22	# etc	Suite, Apt. #, etc.	005	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le l	City State	CI	6. Election Campaign Financing	\$5.00 May Be
23		28 77 77 77	, PC	Trust Fund Contribution	Added to Fees
Zip	Country 25	29 Zip 33102 3	Country -	This corporation has liability for it Florida Statutes	ntangible tax under s. 199.032, Yes X No
24	9. Name and Address of Curren			10. Name and Address of New Reg	
Deci	CTE OFN DCENT	r Sepulaes	81 Name		
REGISTERED AGENT SERVICES CORP.  444 BRICKELL AUE. # 300 83				ess (P.O. Box Number is Not Acceptable	e)
. faltet	Rosever 1	A SE IL SO	D 63		
1			63		
MIA	MI, FL. 3	ろろろし	64 City		EL 85 Zip Code
<b>11.</b> Pursaant	to the provisions of Sections 607 050	2 and 607.1508, Florida Statutes	the above-named corp	poration submits this statement for the pi	urpose 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 1 am fant ar with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE					
12.	Stigrature, typical or portfold name of registered age OFFICERS ANI		Registered Agent signature requirement	ADDITIONS/CHANGES TO OFFICE	FRS AND DIRECTORS IN 12
! <del>^</del>			1.1 TITLE	7,0011010101010101010	Change Addition
NAME	PRES., SEC, TR OSCAR VELAS OF 3501 INVERRI	UEZ	1.2 NAME		
510(112)(08)55	3501 INVERRI	ary BLVD. #1913	1 3 STREET ADDRESS		
CHV \$1.75	FT. LAUDERDALE	FC. 33319	1 4 CITY-ST-ZIP		
1(I, F		L'I DELEIE	2.1 TITLE		Change Addition
NAMe			2 2 NAME		
S RECLADOR AS CODY SIL AP			2.3 STREET AGDRESS 2.4 CITY-ST-ZIP		
		☐ DELET€	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADJUSTES			3 3 STREET ADDRESS		
CTY S1-ZIP		Placer	3.4. CITY - ST - ZIP		
N Li		☐ ÐELETE	41 TITLE		Change L Addition
NAME		1	4 2 NAME 4 3 STREET ADDRESS		
STELLET ADDRESS OF Calle S - Zif			44 CITY-ST-ZIP		
1011 5 71		DELETE	5 1 TITLE		Change Addition
NAM			5 2 NAME		
512-14 Alt 1919:			5 3 STREET ADDRESS		
(11) ST 70			5 4 CITY - ST - ZIP		
1 (1)		☐ DELETE	6.1 TITLE	المناف الله المنطقين المنطق المنطقي المنطق المنطقين المنطقية	Change Addition
NAMI	_		6.2 NAME	00000219	0860 es
STREET ATOMESS	<b>│</b>		6.3 STREET ADDRESS	00000219 -05/27/970101 ***165,00	3015 <i>6/14/97</i>
019-51-79 <b>14.</b> I do here	by certify that the information supplied	d with this filing does not qualify	6.4 CITY-ST-ZIP for the exemption states	本本をより <b>つ。UU</b> i in Section 119.07(3)(i). Florida Statutes	. I further certify that the
14. I do hereby certify that the information supplied with this fiting 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 have an officer or director of the corporation or the receive 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 manded, or on an attachment with an address.					