

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

FILED

Mar 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000033964 (3)

1. Corporation Name

CONSUMER LIGHTING PRODUCTS OF FLORIDA, INC.

Principal Place of Business

4112 PINKNEY ROAD
BALTIMORE MD 21215

Mailing Address

4112 PINKNEY ROAD
BALTIMORE MD 21215-3318



2. Principal Place of Business
21 20101 NE 16 Place

2a. Mailing Address

Suite, Apt. #, etc.

22. Suite, Apt. #, etc.
23 City & State
Miami, FL

27. Suite, Apt. #, etc.
28 City & State

24 Zip
33179 25 Country
USA

29 Zip
30 Country

3. Date Incorporated or Qualified

04/18/1996

3a. Date of Last Report

4. FEI Number
65-0663095

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

CORPCO, INC.
2699 SOUTH BAYSHORE DRIVE
7TH FLOOR
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 of person printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
P/D	STEPHEN A. MACKLER	4112 Pinkney Rd.	Baltimore, MD 21215	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V/D	DAVID J. SIMON	4112 Pinkney Rd.	Baltimore, MD 21215	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S/T/D	FREDERICK L. MACKLER	4112 Pinkney Rd.	Baltimore, MD 21215	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

FREDERICK L. MACKLER
Secretary/Director

(410) 358-7600

Daytime Phone #

0604964

CR2E034 (9/96)