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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000052488 (9)

GASTON	ELECTRONICS, INC.					
Principal Place of Business 1222 NE 4TH AVE		Mailing Address		DO NOT WRITE IN THIS SPACE		
1222 NE 4TH AV FT LAUDERDALE US		1222 NE 4TH AVE FT LAUDERDALE FL 33304 US				
				3. Date Incorporated or Qualified 06/19/1996		
2. Principal Place	e of Business	2a. Mailing Addre	ess	4. FEI Number 65-0730309		
Suite, Apt. #,	etc.	Suite, Apt. #,	etc.	5. Certificate of Status Desired	8. F	
City & State		City & State			\$5 Ac	
Z _I p	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current Personal Property Tax due June 30.	•	
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered Age	nt	

FILED Apr 21 1998 8:00am Secretary of State



2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For					
21	26		65-0730309	Not Applicable					
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional					
22	27		b. Celtificate of Status Desired	Fee Required					
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be					
23	28			Trust Fund Contribution	Added to Fees				
Zip Country	Zip 29	Country		8. This corporation owes or has paid the					
24 25	30	Personal Property Tax due June 30. Yes 🛂 No							
9. Name and Address of Current F	legistered Agent		10. Name and Address of New Registered Agent						
LABOSSIERE, MARC		181	81 Name						
1222 NE 4TH AVE	82	82 Street Address (P.O. Box Number is Not Acceptable)							
FT LAUDERDALE FL 33304									
	83	83							
	84	84 City 85 Zip Code							
		FL 5 2 5 5 5 5 5 5 5 5							
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 obligation	riorida. Such change was a ins of, Section 607.0505, Flo	rida Statutes	тне согрогаці. i.	on's board or directors. Friereby accept the	appointment as registered				
SIGNATURE									
Signature, typed or printed name of registered agent a		Rugistered Age	nt signature require	ed when reinstating) DAT					
12. OFFICERS AND E		13.		ADDITIONS/CHANGES TO OFFICERS					
TITLE D	☐ DELETE	1.1 TITLE		VILLENEUVE AN 3467 BUNKER FLORIDA, 33669	Change Addition				
NAME VILLENEUVE, ANDRE		1.2 NAME	ļ	VILLENEUVE AN	DRE				
			ADORESS	3467 ISUN KER	HUM VANO				
CITY-ST-ZIP QUEBEC, CANADA J6Z 3P4		1.4 CITY-S	T- ZIP	FLORIDA, 33069	SEACI				
TITLE	☐ DELETE	2.1 TITLE		,	☐ Change ☐ Addition				
NAME		2 2 NAME	1						
STREET ADDRESS		23 STREET	ADDRESS						
CITY-ST-ZIP		2.4 CITY-5	ST - ZIP						
TITLE	☐ DELETE	3.1 TITLE	[Change Addition				
NAME		3.2 NAME							
STREET ADDRESS		3.3 STREET	ADDRESS						
CITY-ST-ZIP		3.4. CITY-S	T-ZIP						
TITLE	☐ DELETE	4.1 TITLE			Change Addition				
NAME		4.2 NAME							
STREET ADDRESS		4.3 STREET	ADDRESS						
CITY-ST-ZIP		4.4 CITY-S	T-ZIP						
TITLE	DELETE	5.1 TITLE			Change Addition				
NAME		5.2 NAME	ĺ						
STREET ADDRESS		5.3 STREET	ADDRESS						
CITY-ST-ZIP		5.4 CITY-S	T-ZIP						
TITLE	DELETE	6.1 TITLE			☐ Change ☐ Addition				
NAME		6.2 NAME							
STREET ADDRESS		6.3 STREET	ADDRESS						
CITY-ST-7IP		64 CITY-S							
14. I hereby certify that the information supplied with	Nije filing along not guelify fo			Section 119 07/3)(i) Florida Statutes I furthe	e cortifu that the information				

indicated on one annual report or supplemental annual rejixm is true and accurate and triat my signature shall have the same legal effect as it made under oath; that I am all officer or director of the corporation or tho receiver or trusted 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 appartachmost with an addicas.—