

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

FILED  
Apr 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000062902 (7)

1. Corporation Name

SON ELECTRONICS & SERVICES, INC.

Principal Place of Business

Mailing Address

215 NE 26TH CT.  
POMPANO BEACH FL 33064

215 NE 26TH CT.  
POMPANO BEACH FL 33064



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 17754 133 TRAIL NO.	26 17754 133 TRAIL NO.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 JUPITER, FL.	28 JUPITER, FL.
Zip	Zip
24 33478	29 33478
Country	Country
25 U.S.A.	30 U.S.A.

3. Date Incorporated or Qualified

07/29/1996

4. FEI Number

65-0685460

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOEHRIK, STEVEN L  
215 NE 26TH CT.  
POMPANO BEACH FL 33064

← SAME →

81 Name	LOEHRIK, STEVEN L.
82 Street Address (P.O. Box Number is Not Acceptable)	17754 133 TRAIL NO.
83	
84 City	JUPITER
85 Zip Code	FL 33478

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 typed or printed name of registered agent and firm if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOEHRIK, STEVEN L	1.2 NAME	
STREET ADDRESS	215 NE 26TH CT.	1.3 STREET ADDRESS	
CITY - ST - ZIP	POMPANO BEACH FL 33064	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOEHRIK, KATHLEEN G	2.2 NAME	
STREET ADDRESS	215 NE 26TH CT.	2.3 STREET ADDRESS	
CITY - ST - ZIP	POMPANO BEACH FL 33064	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I 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:

4-20-98 546,744,7979

CR2E034 (10/97)