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 # P96000068717 (3)

ADVANCED ELECTRONICS DISTRIBUTORS, INC.

Principal Place of Business

Mailing Address

FILED Apr 17 1998 8:00am Secretary of State



8278 N.W. B2ND AVENUE MIAMI FL 33122		2278 N.W. 82ND AVENUE Miami Fl 33122				DO NOT WRI	TE INI THI S S E	PACE.		
					_	ate Incorporated or Qualified 08/14/1996		ACE		
2. Principal Place of Business 2a. Mailing Address						1 Number		TAn	plied For	
21 SAN	ne as above	26 Same as a				65-0695239		<u> </u>	t Applicable	
Sulte, Apt.	# etc	Suite, Apt. #, etc.				•		\$8.75		
22	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27	27			ertificate of Status Desired		Fee Re		
City & Stat	9	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country Zip Cou									
24	25	29	30		t	Personal Property Tax due June 30. 🔲 Yes 📈 No				
9. Name and Address of Current Registered Agent					10. N	ame and Address of New F	Registered A	gent		
ROBINSON, ORLANDO					ne					
7252 SOUTH WEST 22ND STREET			-	B2 Stre	ot Address (P.O.	Box Number is Not Accept	ahla)			
MIAMI FL 33155				500	et Address (F.O.	DOX 14011DEC 13 1401 ACCOPT	abiej			
"			B3							
			-					lant re. /	21-	
				B4 City			FL	65 Zip (Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida St atu	les, the ab	ove-nam	ed corporation s	ubmits this statement for the	purpose of o	hanging it	s registered	
office or r	registered agent, or both, in the State	ol Florida Such change was akèns⇔if Section 607.0505. El	authorized orida Stati	by the c ites	orporation's boa	rd of directors. Thereby acc	ept the appo	intment as	registered	
agent. I am familiar of the and accept the obligations of Socion 607.0505, Florida Statutes.										
SIGNATURE	Signature, typed or printed name of registered age		E: Bog-stered	Agent signa	dure required when rein	istating)	DATE			
12.	OFFICERS AND		13.			DITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR		
TITLE	P	DELETE	1.1 110	.E	V.P.		[Change	Addition	
NAME	FLEARY, LENNOX		1.2 NAI	N E	Heil	FLOARY -	_			
STREET ADDRESS	20300 N.W. 3RD AVENUE		1.3 STF	EET ADDRE	1061	New 14516	rrr			
CITY-ST-ZIP	MIAMI FL 33169		1,4 CIT	Y - ST - ZIP	MI	mi pe 33	1168			
TITLE	VP	☐ DEL ete	2.1 1()	£	pressio	2 Lucas		Change	Addition	
NAME	ROBINSON, ORLANDO		2.2 NAI	ΛE	Orland	to Kobinsan	-			
STREET ADDRESS	7252 S.W. 22ND STREET		2.3 STF	EET ADDRES	is 7	DEW 22NO	87			
CITY-ST-ZIP	MANAMI FL 33155		2.4 CF	Y-ST-ZIP	MIN	nt FL 331	56			
TITLE		☐ DELETE	3.1 TIT	.£				Change	☐ Addition	
NAME			3.2 NAI	λE						
STREET ADDRESS			3.3 STF	EET ADDRE	ss		•			
CFTY-ST-ZIP			3.4. CI	Y-ST-ZIP						
TITLE		☐ DELETÉ	. 4.1 TITI	.E			T	Change	Addition	
NAME			4.2 NA	ME						
STREET ADORESS			4.3 STF	EET ADDRES	ss					
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP	į .			`` 		
TITLE		DELETE	5.1 TIT	.E		,		Change	Addition	
NAME			5.2 NAI	ΛE						
STREET ADDRESS			5.3 STF	EET ADDRES	ss					
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP						
TITLE		DELETE	6.1 TIT	.E				Change	Addition	
NAME			6.2 NA	NE						
STREET ADDRESS			6.3 STF	EET ADDRES	ss					
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP						
				 -		Ido ordolas Electric Dieter	17 35	2 1 1 1 1		

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 informatic 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.

> /- J /92