

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

FILED
May 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000073718 (4)

1. Corporation Name

DYNASTY ELECTRONICS, INC.



Principal Place of Business

204 SOUTH SEMORAN BLVD.
ORLANDO FL 32807

Mailing Address

204 SOUTH SEMORAN BLVD.
ORLANDO FL 32807-3802

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

09/01/1996

3a. Date of Last Report

N/A

4. FEI Number

59-3424307

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

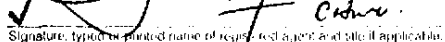
WILKINS, ROBERT C JR
230 LOOKOUT PLACE
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name ALZNER, FRED C
82 Street Address (P.O. Box Number is Not Acceptable) 204 SOUTH SEMORAN BLVD
83
84 City ORLANDO FL 85 Zip Code 32807

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, if 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 title if applicable.

FRED C ALZNER, CHAIRMAN
(NOTE: Registered Agent signature required when reappointing)

☒

12. OFFICERS AND DIRECTORS

TITLE D
NAME ALZNER, FREDRICH
STREET ADDRESS 5843 COVE DRIVE
CITY-ST-ZIP ORLANDO FL 32812 ☐ DELETE

TITLE D
NAME PERROTTI, FRED O
STREET ADDRESS 8012 OLD TOWN DRIVE
CITY-ST-ZIP ORLANDO FL 32819 ☐ DELETE

TITLE D
NAME PERROTTI, JACQUELINE
STREET ADDRESS 8012 OLD TOWN DRIVE
CITY-ST-ZIP ORLANDO FL 32819 ☒ DELETE

TITLE D
NAME ALZNER, JENNIFER
STREET ADDRESS 5843 COVE DRIVE
CITY-ST-ZIP ORLANDO FL 32812 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE C D
1.2 NAME ALZNER, FRED C
1.3 STREET ADDRESS 6504 SAINT PARTIN PLACE
1.4 CITY-ST-ZIP ORLANDO, FL 32812 ☒ Change ☐ Addition

2.1 TITLE C D
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☒ Change ☐ Addition

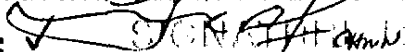
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE V D
5.2 NAME PERROTTI, ROBERT S
5.3 STREET ADDRESS 926 GROVESMERE LOOP
5.4 CITY-ST-ZIP OCOCHEE, FL 34761 ☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:  FRED C ALZNER

(407) 275-2400

CR2E034 (9/96)