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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000090597 (1)

ANALOG & DIGITAL ELECTRONICS CORPORATION

Principal Place of Business Maling Address 19654 NW 83RD PLACE 19654 NW 83RD PLACE MIAMI FL 33015 MIAMI FL 33015-5959 3. Date Incorporated or Qualified 3a. Date of Last Report 11/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For X Not Applicable Suite, Apr. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 29 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MACHIN, JOSE L 19654 NW 83RD PLACE Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33015** 83 84 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. Lam familiar with, and accept the obligations of, Section 607,0505. Florida Statutes. neigh registered agent and tile it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6)DELETE Change Addition 1.1 TITLE TITLE Jose L. Machin 19654 NW 83 1.2 NAME CR2E034 NAME 83 Pl. 33015 STREET ADDRESS 1.3 STREET ADDRESS Miami, FL. CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Addition Change Till.E 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-\$1-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZiP CITY-ST-7P DELETE 4.1 TiTLE Change ☐ Addition THILE 4.2 NAME MAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY - ST - ZIP CITY-ST-ZIP

14. Lido hereby certify that the information supplied with this filling 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 suppliemental 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.

64 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

6171718

6.2 NAME

5.3 STREET ADORESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE: JOSE L. MACHIN

THLE

NAME

TIFLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST- 7IP

(mal)

DELETE

DELETE

01/09/97

(305) 829-0350

Addition

Addition

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Change

FILED

Jan 17 1997 8:00am

Secretary of State