

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

FILED

Apr 30 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 # P97000002482 (2)
 1. Corporation Name
J & J ELECTRONICS OF ORLANDO, INC



Principal Place of Business 6325 N OBT. SUITE 131 ORLANDO FL 32810	Mailing Address 6325 N OBT. SUITE 131 ORLANDO FL 32810
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/06/1997	
21 Suite, Apt. #, etc	22 City & State	23 Zip	24 Country	25	26
27		28		29	
29		30		31	

4. FEI Number 59-3404243	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
LYDICK, RUTH
5234 N OBT #107
ORLANDO FL 32810

10. Name and Address of New Registered Agent

81 Name	Ruth Lydick
82 Street Address (P.O. Box Number is Not Acceptable)	1920 Olivia Circle
83	
84 City	Apopka
85 State	FL
86 Zip Code	32703

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 607.0507, Florida Statutes.

SIGNATURE **Ruth Lydick Dec/Tres**
 Signature type or printed name of registered agent and title 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	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARKER, JAMES	1.2 NAME	John Downsborough
STREET ADDRESS	4165 E VISTA CT	1.3 STREET ADDRESS	1920 Olivia Circle
CITY-ST-ZIP	KISSIMMEE FL 34748	1.4 CITY-ST-ZIP	Apopka, Fla 32703
TITLE	D	2.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DOWNSBROUGH, JOHN	2.2 NAME	Brian Hempton
STREET ADDRESS	5234 N OBT #107	2.3 STREET ADDRESS	3507 Summer Haven Lane
CITY-ST-ZIP	ORLANDO FL 32810	2.4 CITY-ST-ZIP	Apopka Fla 32703
TITLE	Downsbrough, John	3.1 TITLE	Sec/Tres. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1920 Olivia Circle	3.2 NAME	Ruth Lydick
STREET ADDRESS	Apopka, Fl. 32703	3.3 STREET ADDRESS	1920 Olivia Circle
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Apopka, Fla 32703
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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.

CP2E034 (10/97)