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FILED
May 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. [Signature] Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P970000037253

1. Corporation Name
HIGHLINE ELECTRONICS INC.

Principal Place of Business <u>199 E. FLAGLER ST. MIAMI, FL 33131</u>	Mailing Address <u>PO BOX 427 HALLANDALE FL 33008</u>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
4/25/97

4. FEI Number
65-0749886

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

MEAIR, HERZEL
(PO BOX 427) 643 OLEANDER DR.
HALLANDALE, FL 33008

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE [Signature] DATE 5/6/98

12. OFFICERS AND DIRECTORS

TITLE	☒ DELETE
NAME	<u>MEAIR, HERZEL C.R.L</u>
STREET ADDRESS	<u>PO BOX 427</u>
CITY - ST - ZIP	<u>HALLANDALE, FL 33008</u>
TITLE	☐ DELETE
NAME	<u>HERZEL MEAIR</u>
STREET ADDRESS	<u>643 OLEANDER DRIVE</u>
CITY - ST - ZIP	<u>HALLANDALE, FL 33008</u>
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	<u>P.O. BOX 427 (N/A)</u>
1.3 STREET ADDRESS	<u>HALLANDALE, FL 33008-0427</u>
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 I 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 [Signature] DATE 3/2/98

CR2E034 (10/97)