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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700046017

AT SEA ELECTRONICS, INC.

			•-
Principal	Place	of E	Business

14301 BRIARTHORN DR. TAMPA FL 33625

Mailing Address

14301 BRIARTHORN DR TAMPA FL 33625

FILED

Jan 28, 1999 8:00am

Secretary of State

01-28-1999 90023 036 ***150.00

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/20/1997 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-3449748 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt, #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5,00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country 8. This corporation owes the current year Intangible Zip 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HOEL, RONALD B Street Address (P.O. Box Number is Not Acceptable) 14301 BRIARTHORN DR. **TAMPA FL 33625** 83

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.

84 City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS Change ☐ DELETE 1.1 TITLE **PTMS** TITLE HOEL, RONALD 1.2 NAME . NAME 14301 BRIARTHORN DR 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL 33625 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 2.1 TITLE 2.2 NAME · NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE TITLE 3.2 NAME NAME. 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE 61 TITLE ☐ Change TITLE 14000 弹时间的心 NAME 7...,# 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

JANLUAPY 11, 1548 813-961-3829

CR2E034 (11/98)