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

PROFIT
CORPORATION
ANNUAL REPORT
1998
DOCUMENT #
1. Corporation Name
FULTRONICS, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

T# P97000051202 (4)

FULTRONICS, INC.

FILED

Mar 26 1998 8:00am

Secretary of State

Principal Place of Business Mailting Address

11211 SOUTH MILITARY TRAIL

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SUITE 4324 BOYNTON BEACH FL 33436		SUITE 4324 BOYNTON BEACH FL 33436			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 06/09/1997						
2. Principal Place	of Business	2a. Mailing Address				4.	FEI Number		X	Applied For	
1		26					65-0767790			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.			5.	Certificate of Status Desired			5 Additional e Required	
City & State		City & State	6			6.	Election Campaign Financing Trust Fund Contribution		• -	00 May Be led to Fees	
Žip I	Country 25	Zıp 29	30	untry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
FULTON, UNAKE				81	Name						
				82 Street Address (P.O. Box Number is Not Acceptable)							
	Y BEACH FL 33445			B 3							

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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.

B4 City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition President Drake Fulton 1.2 NAME 1731 W. Atlanto Avenue - B13 STREET ADDRESS 1.3 STREET ADDRESS Delviny Beach, FT. CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE Addition 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Addition 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 afring 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 control or the receiver of 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 chapter 607 or on an attachment with an address.

x 3/00/08

V. KIN - 1105-2201

85 Zip Code