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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000065498 (2)

PARADISE MARINE ELECTRONICS INC.

## FILED Apr 30 1998 8:00am Secretary of State



			· <del></del>	
Principal Place of Business Mailing Address				
1409 SOUTH WEST 18TH STREET 1409 SOUTH WEST 18TH S				
FORT LAUDERDALE FL 33315-1950		FORT LAUDERDALE FL 3	3315-1950	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				07/25/1997
9 Principal P	Place of Rusiness	2a. Mailing Address		
2. Principal Place of Business		26. Walling Address		4. FEI Number 65-0770235 Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$0.75 Audition 1
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agent
AR	RAUJO, SILVIO C		81 Nan	ne
1409 SOUTH WEST 18TH STREET			<b>82</b> Stre	et Address (P.O. Box Number is Not Acceptable)
FORT LAUDERDALE FL 33315-1950			01 3116	of Address (1.0. bbx Northber is Not Accoptable)
			83	
			24	lool 7- Ood-
			84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	s, the above-name	ed corporation submits this statement for the purpose of changing its registered
Office or a	registered agent, or both, in the Sta am familiar with, and accept the ob-	ite of Florida. Such change was a ligations of Section 607 0505. Flor	uthorized by the c rida Statutes	orporation's board of directors. I hereby accept the appointment as registered
-				
SIGNATURE	Signature, typed or printed name of registerrio	agent and the if explicable (NOT)	Registered Agent signs	fure required when reinstating) DA1E
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		☐ DELET <b>E</b>	1.1 TITLE	□ Change □ Addition
NAME			1.2 NAME	SI/VIO ARANGO S 1409 SW 18 SMER T FRAT LAN DENGLIE, F1 23315-1950
STREET ADDRESS			1.3 STREET ADDRES	s 1409 SWIF SMEET
CITY-ST-ZIP			1.4 CITY - ST - ZIP	
TITLE		☐ DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRES	is [
CITY-ST-ZIP			2.4 CITY-S1-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRES	is
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRES	s
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRES	s
CITY-ST-ZIP			54 CITY - ST - ZIP	
TITLE		☐ DELETE	61 TITLE	☐ Change ☐ Addilion
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRES	s
CITY-ST-ZIP			6.4 CITY - ST - ZIP	

14. Thereby 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 is 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 coloron or the receiper 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 charged, or on an attachment with an address.

2/10/02