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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name "P37000002914 (7)													
	A.G. ELI	ECTHON	ICS, INC.							1 1881188£ 118 1861 88(4 84)			114 240 4 1 00 1
		_											
Principal Place of Business Mailing Address										n immurman ilim (mill) ramis minis italis	LANIH ANDLE E	dial irdeo adada ial)
16368 130TH AVENUE. NORTH				163	16366 130TH AVENUE. NORTH								
JUPITER FL 33478			JUF	JUPITER FL 33478					DO NOT WRITE IN THIS SPACE				
										3. Date Incorporated or Qualific			
										09/23/1997			
2.	Principal Pla	pal Place of Business			2a. Mailing Address				1	4. FEI Number		A	pplied For
21	A 10				26					65-078556b			ot Applicable
	Suite, Apt. #, etc.				Suite, Apt #, etc.					5. Certificate of Status Desired			Additional equired
22	City & State	& State			City & State					E Florian Compaign Financia		···	·
23	J.,				28				'	Election Campaign Financing Trust Fund Contribution	, D		May Be to Fees
	Zip	Country			Zip Country				8. This corporation owes or has paid the current year Intangible				
24		25 29				30				Personal Property Tax due J			No
		9. Name	and Address of C	urrent Registe	red Agent				10	0. Name and Address of New	Registere	d Agent	
HAP, JEFFREY					81			Name					
341 WEST INDIANTOWN RD							Street A	Address	(P.O. Box Number is Not Accept	table)			
JUPITER FL 33458				83									
								City				les 7:0	Code
								City			F		Code
11	 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Sta 								corporat	tion submits this statement for the	e purpose	of changing i	ts registered
	agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Stat								oralion s	s board of difectors. Thereby at	cept the a	ppointment as	registered
SiC	NATURE _			i trigger									
12		Signature types	OFFICER	S AND DIRECT	·	TE Registered .	Agen	t signature i	recluireo wr	ADDITIONS/CHANGES TO OF	DATE FICERS A	ND DIRECTOR	RS IN 12
TITLE							ELITTLE P/					Change	Addition
NAME						1.2 NAN	1E		Aug	ust Gross ,			
STREET ADDRESS		13					1.3 STREET ADDRESS \6		1636	ust Gross L 130th Ave N			
CITY-ST-ZIP						1.4 City	1.4 CHY-ST-ZIP			Hew, FL 33478			
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NAME						3.2 NAN							
STREET ADDRESS								DDRESS					
CITY-ST-ZIP					3.4. CIT								
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STREET ADDRESS						4.3 STREET ADDRESS							
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	EET ADDRESS							DDRESS					ļ
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	EET ADORESS							DORESS					
	-ST-ZIP						6.4 CITY-ST-ZIP						
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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.

FILED

May 01 1998 8:00am

Secretary of State