

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2004 OCT -6 AM 8:04

DOCUMENT # P97000098419

1. Entity Name  
AMBASSADOR ELECTRONICS SUPPLY, INC.



Principal Place of Business  
111 LAKE EMERALD DRIVE #402  
OAKLAND PARK, FL 33309

Mailing Address  
PO BOX 6416  
FORT LAUDERDALE, FL 33310

2. Principal Place of Business

3. Mailing Address

Kin 2976 P.O. Box 025580

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
Miami, FL

Zip

Country

Zip

33102-5580

Country

U.S.A.

513104 90407 048 150.00  
09202004 Chg-P CR2E034 (10/03)

4. FEI Number  
65-0797876

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GARDNER, PAULETTE  
12000 NW 29 MANOR  
FORT LAUDERDALE, FL 33323

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DPTS  
DIBBS, JOSEPH  
111 LAKE EMERALD DRIVE #402  
OAKLAND PARK, FL 33309 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Kin 2976 P.O. Box 025580  
Miami, FL 33102-5580 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joseph Dibbs

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/20/04

Date

Daytime Phone #

10/6/04