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CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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DIVISION OF CORPORATIONS
95 JAN 26 PM 4:26

DOCUMENT # **S58045** **(3)**

1. Corporation Name
CRYSTRONICS, INC.

Principal Place of Business	Mailing Address
2631 E. OAKLAND PARK BLVD. SUITE 208 FT. LAUDERDALE FL 33306 US	2631 E. OAKLAND PARK BLVD. SUITE 208 FT. LAUDERDALE FL 33306 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/07/1991	3a. Date of Last Report: 01/25/1994
4. FEI Number: 65-0268786	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 2400 E. Commercial Blvd	26 2400 E. Commercial Blvd
Suite, Apt. #, etc. 22 Suite #230	Suite, Apt. #, etc. 27 Suite #230
City & State 23 Ft. Lauderdale FL	City & State 28 Ft. Lauderdale FL
Zip 24 33308	Country 25 USA
Zip 29 33308	Country 30 USA

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SADRIWALLA, DEBORAH 2631 E OAKLAND PARK BLVD STE #208 FT LAUDERDALE FL 33306	01 Name: Sadriwalla, Deborah 02 Street Address (P.O. Box Number is Not Acceptable): 4351 NE 22 Avenue 03 04 City: Ft. Lalderdale FL 05 Zip Code: 33308

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.

SIGNATURE: Deborah Sadriwalla — 1/19/95
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D ☒ Change ☐ Addition
NAME	SADRIWALLA, ABBAS A.	1.2 NAME	Sadriwalla, Abbas A.
STREET ADDRESS	2631 E. OAKLAND PARK BLV	1.3 STREET ADDRESS	4351 NE 22 Avenue
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	Ft. Lauderdale, FL. 33308
TITLE	D	2.1 TITLE	D ☒ Change ☐ Addition
NAME	SADRIWALLA, DEBORAH	2.2 NAME	Sadriwalla, Deborah
STREET ADDRESS	2631 E OAKLAND PARK BLVD	2.3 STREET ADDRESS	4351 NE 22 Avenue
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	Ft. Lauderdale, FL. 33308
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Deborah Sadriwalla — 1/19/95 — 305-772-0031
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0913401 CP