FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2003 8:00 am
Secretary of State
03-21-2003 90109 050 ***150.00

DOCUMENT # S65760

1. Entity Name: EDX Electronics, Inc.

DO NOT WRITE IN THIS SPACE

10043501

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2. Principal Place of Business	3. Mailing Address
1040 Willa Springs Drive	1040 Willa Springs Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Winter Springs FL	City & State: Winter Springs, FL
Zip: 32708 Country: USA	Zip: 32708 Country: USA

4. FEI Number: 59-3076063 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Mitchell Bonett

Street Address (P.O. Box Number is Not Acceptable): 675 Keuka Court

City: Winter Springs **FL** Zip Code: 32708

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

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V/D
NAME	Mitchell Bonett
STREET ADDRESS	675 Keuka Court
CITY-ST-ZIP	Winter Springs FL 32708
TITLE	P/D/S
NAME	Dennis Menefee
STREET ADDRESS	350 Deer Pointe Circle
CITY-ST-ZIP	Casselberry FL 32707
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Mitchell J Bonett 3/18/03 (407)831-4100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #