FILED Apr 20, 1999 8:00 am

Secretary of State

04-20-1999 90057 038 ***158.75

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PROFIT CORPORATION ' **:::** UAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

CUMENT # S73113 orporation Name

BOCA COMPLEX COMPONENT DESIGNS INC.

Mailing Address Principal Place of Business 1068 SW 5TH STREET 1068 SW 5TH STREET **BOCA RATON FL 33486 BOCA RATON FL 33486** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/12/1991 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0279070 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 Country This corporation owes the current year Intangible Country Zip □No Personal Property Tax. ☐ Yes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name AMES, RICHARD N. Street Address (P.O. Box Number is Not Acceptable) 82 1068 SW 5TH STREET **BOCA RATON FL 33486** 83 Zip Code 84 City 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 Signature, typed or printed name of registered agent and title if applica (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition ☐ Change DELETE 1.1 TITLE TITLE 12 NAME RICHARD N. AMES NAME 1068 SW 5TH ST. 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 2.1 TILE TITLE W 2.2 NAME AMES, ROSE J NAME 2.3 STREET ADDRESS 1068 S.W. 5TH ST. STREET ADDRESS **BOCA RATON FL 33486** 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP . . 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 with an address, with all other like empower

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

51 TITLE

5.2 NAME

6.1 TITLE

62 NAME

☐ DELETE

☐ DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CJTY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

CR2E034 (11/98)

Addition

☐ Addition

Addition

Change

Change

☐ Change