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Mar 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V28007 (5)
1. Corporation Name
ELECTRONIC BALLAST SYSTEMS CORPORATION



Principal Place of Business Mailing Address
2503 SW 27TH AVE 2503 SW 27TH AVE
MIAMI FL 33133 MIAMI FL 33133
US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 13935 S.W. 252 ST. 25 P.O. BOX 453836
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 HOMESTEAD, FL. 28 MIAMI, FL.
24 33032 25 U.S. 29 33245-3836 30 U.S.

3. Date Incorporated or Qualified
04/06/1992
4. FEI Number 85-0326093 Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution ☐ Added to Fees
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
VILA, OSCAR J 111
338 MINORCA AVE
CORLA GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	VILA, OSCAR J.	1.2 NAME	OSCAR J. VILA
STREET ADDRESS	2503 SW 27TH AVE	1.3 STREET ADDRESS	13935 S.W. 252 ST.
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	HOMESTEAD, FL 33032
TITLE	VP	2.1 TITLE	VP
NAME	MELIS, JANOS	2.2 NAME	JANOS MELIS
STREET ADDRESS	2503 SW 27TH AVE	2.3 STREET ADDRESS	13935 S.W. 252 ST.
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	HOMESTEAD, FL 33032
TITLE	S	3.1 TITLE	
NAME	VILA, OSCAR J. III	3.2 NAME	
STREET ADDRESS	338 MINORCA AVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL GABLES FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	T
NAME		4.2 NAME	JAVIER VILA
STREET ADDRESS		4.3 STREET ADDRESS	13935 S.W. 252 ST.
CITY - ST - ZIP		4.4 CITY - ST - ZIP	HOMESTEAD, FL 33032
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Oscar Vila President 3/16/98 (305) 631-1409

CR2E034 (10/97)