## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1006

	1330	THE SECOND OF					
DOCU 1. Corporatio	MENT # V404	481 (6)					
	ITY ELECTRONICS SERV	VICE. INC.					
Q0/12	THE CECOTHOLICO OF IT	TIOL, IIIO			E MAGNI BOYANI BYRAK ARKO BIRAK KR	Al 2001 dibir andır dib	ANA BEBUL BUBUR BARAH KRBA
Principal Place of Business Mailing Address							
1006 S BERMUDA AVENUE KISSIMMEE FL 34741		1006 S BERMUDA AVENUE KISSIMMEE FL 34741					
					3. Date Incorporated or Qualified 06/02/1992	3a. Date of L	Last Report <b>0/1995</b>
	lace of Business	2a. Mailing Address	**		4. FEI Number	k 2. milia	Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc			59-3126630	<del>-</del>	Not Applicable
22		27	h '		5. Certificate of Status Desired	□ <b>&gt;</b>	8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing		\$5.00 May Be
23	Constant	28			Trust Fund Contribution	U	Added to Fees
Ζ(ρ <b>24</b>	Country 25	<i>Ζ</i> φ <b>29</b> ]	Country 30		8. This corporation has liability for Horida Statutes	intangible tax un s □ No	ider s. 199.032,
	9. Name and Address of Cu				10. Name and Address of New I		nt
			81	Name			
	OLER, WESLEY S		82	Street Add	ress (P.O. Box Number is Not Acceptal	ple)	
7206 BOICE ST. ORLANDO FL 32809			83	ļ			
UNLAN	DO FL 32809			ļ			
			84	Gity		F) 85	5 Zip Code
11. Pursuant or registe familiar w	to the provisions of Sections 607, red agent, or both, in the State of ith, and accept the obligations of	0502 and 607,1508, Florida Statut Florida, Such change was authoriz Section 607,0505, Florida Statutes	tes, the above red by the corp s.	named corpo poration's boa	ration submits this statement for the purify of directors. Thereby accept the app	irpose of changin pointment as regis	ig its registered office stered agent. I am
SIGNATURE	,						
12.	Signature, type dicriprinted name of registered	agent and stient apparable (NS AND DIRECTORS	Dit : Registered Age	id signature require		DAIL	E07000 IV 40
TITLE	D	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME	CHANDLER, WESLEY S		1.2 NAME			<u>.</u>	
STREET ADDRESS	7206 BOICE STREET		1.3 STREE	LADDRESS			
CITY-S1-ZIP	ORLANDO FL 32809		1.4 Ci1Y - 3	51 - ZIP			
THUE		DELETE	2 1 101.1			☐ Ch	nange 🔲 Addition
NAME STREET ADDRESS			2.2 NAME				
CITY - S1 - ZIP			2.3 STREE	1			
TIGHE	<del></del>	DELETE	2.4 CHY-5	21-20		Cri	nange
NAME		<del></del>	3.2 NAME				
STREET ADDRESS			33 STREE	LADDRESS			
CHY-S1-ZIP			3.4 CHTY - 5	ST - ZIP			
TITLE		☐ DELETE	4 1 TOTLE			Cn	nange 🔲 Addition
NAME			4.2 NAME				
STREET ADDRESS			43STHEE	AUDRESS			
CITY ST ZIF		C) OF LETT	4.4 CITY - S	ST - 712			
TOLE NAME		DETELE	5 1 TITLE			Ch	nange 🔲 Addition
STREET ADORESS			5.2 NAME 5.3 STREET	Ahno: ee			İ
CITY - ST - ZIP			5.4 C/TY - S	1			
TITLE		DELETE	6 1 THE			☐ Ch	nange Addition
NAME		<del></del> -	€ 2 NAME			<u> </u>	
STHELT ADDRESS			63 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CHY - 9				
14 Ldo hereb	ny certify that the information suppl	lied with this filling is voluntarily furn	nichad and don	e not qualify f	or top execution stated in Section 110	OZYZYIA Florida (	Ctatutos I further

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)(k), 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. Flor da Statutes, and that my name appears in Block 12 or Block 13 if changed, or an a plachment with an address

GNATURE:

WESLEY S, CHAPLER

3-9-96

407-846-2137

Indie

Total

To

SIGNATURE:

3-9-96 407-846-2137 Date Deplace Proces