

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V56450** (2)

1. Corporation Name

H & J ELECTRONICS INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

**2700 W. CYPRESS CREEK ROAD
SUITE 1200
FT. LAUDERDALE FL 33309**

**2700 W. CYPRESS CREEK ROAD
SUITE 1200
FT. LAUDERDALE FL 33309**

3. Date Incorporated or Qualified

08/10/1992

3a. Date of Last Report

03/23/1995

2. Principal Place of Business

21

State Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

State Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0349419

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHAPIRO, MICHAEL
2700 W. CYPRESS ROAD
SUITE 1200
FT. LAUDERDALE FL 33309**

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 in this blockage is not to be used

Signature typed or printed in this blockage is not to be used

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ DELETE

NAME
SHAPIRO, MICHAEL
STREET ADDRESS
2700 W. CYPRESS CREED RD
CITY-STATE-ZIP
FT. LAUDERDALE FL 33309

2.1 TITLE ☐ DELETE

NAME
SHAPIRO, MICHAEL
STREET ADDRESS
2700 W. CYPRESS CREED RD
CITY-STATE-ZIP
FT. LAUDERDALE FL 33309

3.1 TITLE ☐ DELETE

NAME
SHAPIRO, MICHAEL
STREET ADDRESS
2700 W. CYPRESS CREED RD
CITY-STATE-ZIP
FT. LAUDERDALE FL 33309

4.1 TITLE ☐ DELETE

NAME
SHAPIRO, MICHAEL
STREET ADDRESS
2700 W. CYPRESS CREED RD
CITY-STATE-ZIP
FT. LAUDERDALE FL 33309

5.1 TITLE ☐ DELETE

NAME
SHAPIRO, MICHAEL
STREET ADDRESS
2700 W. CYPRESS CREED RD
CITY-STATE-ZIP
FT. LAUDERDALE FL 33309

6.1 TITLE ☐ DELETE

NAME
SHAPIRO, MICHAEL
STREET ADDRESS
2700 W. CYPRESS CREED RD
CITY-STATE-ZIP
FT. LAUDERDALE FL 33309

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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)(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, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

1-26-96

854-97-7750

CR2E034 (12/95)