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Feb 04 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 # P97000047518 (0)

1. Corporation Name

ICBM RECHARGING, INC.

Principal Place of Business

3700 SOUTH HOPKINS AVENUE
SUITE F
TITUSVILLE FL 32780

Mailing Address

3700 SOUTH HOPKINS AVENUE
SUITE F
TITUSVILLE FL 32780

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/27/1997

4. FEI Number

59-3448041

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 3416 S. WASHINGTON AVE

Suite, Apt. #, etc.

2a. Mailing Address

26 3416 S. WASHINGTON AVE

Suite, Apt. #, etc.

City & State

23 TITUSVILLE FL

City & State

28 TITUSVILLE FL

Zip

24 32780

Country

Zip

29 32780

Country

9. Name and Address of Current Registered Agent

CAMP, RUSH
3700 SOUTH HOPKINS AVENUE
SUITE F
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name

CAMP, RUSH

82 Street Address (P.O. Box Number is Not Acceptable)

3416 S. WASHINGTON AVE

83

84 City

TITUSVILLE

FL

85 Zip Code

32780

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 agent 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

TITLE PD ☐ DELETE

NAME CAMP, RUCH

STREET ADDRESS 3700 SOUTH HOPKINS AVENUE, SUITE F

CITY-ST-ZIP TITUSVILLE FL 32780

TITLE STD ☐ DELETE

NAME MCDONOUGH, MICHAEL

STREET ADDRESS 3700 SOUTH HOPKINS AVENUE, SUITE F

CITY-ST-ZIP TITUSVILLE FL 32780

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD

PRESIDENT

☒ Change ☐ Addition

1.2 NAME

CAMP, RUSH

1.3 STREET ADDRESS

3416 S. WASHINGTON AVE

1.4 CITY-ST-ZIP

TITUSVILLE, FL 32780

2.1 TITLE

SEC., TRES.

☒ Change ☐ Addition

2.2 NAME

MCDONOUGH, MICHAEL

2.3 STREET ADDRESS

3416 S. WASHINGTON AVE

2.4 CITY-ST-ZIP

TITUSVILLE, FL 32780

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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:

Rush, Camp, RUSH CAMP

01/29/98

(407) 383-2434

CR2E034 (10/97)