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

1996

254377

(5)

DOCUMENT # 2: 1. Corporation Name ROCKET ELECTRIC INC

Principal Place of Business	Mailing Address
155 N. RANGE ROAD COCOA FL 32926	155 N. RANGE ROAD COCOA FL 32926



					3. Date Incorporated or Qualified 12/28/1961		f Last Report /10/1995
Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied Fo
21		26		· · · · · · · · · · · · · · · · · · ·	59-0940926		Not Applic
Suite, Apt. #, etc. Suite, Apt. #, etc. 22			5. Certificate of Status Desired			\$8.75 Addition Fee Required	
City & State	-	Orty & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May B Added to Fees
<i>Ζ</i> ιρ 4	Country 25	7(p	Gounti 30	Y	8. This corporation has liability for Florida Statutes	intangibie tax u	under s. 199.032.
<u>-1</u>	9. Name and Address of Curren				10. Name and Address of New F	tegistered Ag	jent
			8	Name			
ARVON	io, edward jr.		8	Street Addr	ess (P.O. Box Number is Not Acceptab	niel	
	RON ROAD			Street Addi	ess (* .c. box remoch is not recopial		
COCOA	FL 32926		8	3			
			8	City		P 1	85 Zip Code
				1	ration submits this statement for the pu	<u> </u>	. <u>L</u>
familiär wit SIGNATURE	h, and accept the obligations of, Sect	iori 607.9505, Florida Statut			rd of directors. Thereby accept the app	DATE	J
12.	OFFICERS AN		13.	art arbancus colono	ADDITIONS/CHANGES TO OFF		IRECTORS IN 12
TITLE	P	DELETE	1.3 Title				Change
NAME	arvonio, edward jr.		1.2 NAM				
SZAROCA 199HTS	820 HERON RD.		1.3.STEE	T ACORESS			
DITY-ST-ZIP	COCOA FL		1.4 CHY	ST-ZIP	<u>.</u>		
TITLE	V	☐ DELETE	2 1 TiTu				Change 🔲 Add
NAME	CROCKETT, ARLIN P.		2 2 NAM				
STREET ADDRESS	405 MAGNOLIA AVE.		23STRE	329RDCA T			
CITY - ST - ZIP	MERRITT ISLAND FL		2 4 CITY	ST - ZIF			
TITLE	st Arvonio, Kathryn M.	☐ DELETE	3. 1 THE			LJ	Change 🔲 Add
NAME	820 HERON RD.		3 2 NAM				
STREET ADDRESS	COCOA FL			ET ADDRESS			
CITY - ST - ZIP TITLE	OUUNIL	☐ DELETE	3 4 CITY 4 1 TiTL	S1 - ZIP			Change
NAME		[_] bett it	4 7 IIIL			L	55·9· [] A00
STREET ADDRESS				T ADDRESS			
OTY-ST ZIF			4 4 CITY				
IIILE		☐ DELETE	5 I TILL				Change Add
NAME			5 2 NAM				
STREET ADDRESS			5 3 STRE	T ADDRESS			
CITY-ST-ZIP			5 4 CITY	ST-ZIP			
TITLE		☐ DELETE	6 1 TITL				Change Add
NAME			6.2 NAM				
STREET ADDRESS			63 SIRE	LADDRESS			
CITY - ST - ZIP			6.4 CITY	ST-7IF			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and dives 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 the 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 13 if changed or on an attachment with an address.

SIGNATURE:

Edward Arus nie Tr GNATURE AND TYPED OF POMITED NAME OF SICHER OR DIRECTO?

Edward Arusais Jr. 4/24/96 (407) 633-6245

CR2E034 (12/95)