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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEF'ARTMENT OF STATE

## Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9700002509 (4)

## FILED Apr 21 1998 8:00am Secretary of State

ADCOM ENGINEERING INC. Principal Place of Business Mailing Address 1455 ASHBORO CIR., S.E. 1455 ASHBORO CIR., S.E. PALM BAY FL 32909 PALM BAY FL 32909 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/08/1997 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 59-3412415 21 Not Applicable Suite Apt # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be **1rust Fund Contribution** 23 Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes | 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 WALKER, DONNA 1455 ASHBORO CIR., S.E. 82 Street Address (P.O. Box Number is Not Acceptable) PALM BAY FL 32909 83 84 City 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature: typed or pented name of repiderest age of and title diapple...able ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE ☐ Change Addition TITLE 1.1 1011 WALKER, LEROY L 1.2 NAME CR2E034 NAME 1455 ASHBORO CIR., S.E. 1.3 STREET ADDRESS STREET ADDRESS PALM BAY FL 32909 CITY-ST-ZIP 1.4 CHY-ST-7)P DELETE Change Addition TITLE 2.1 TBLE WALKER, DONNA NAME 2.2 NAME 1455 ASHBORO CIR., S.E. STREET ADDRESS 2.3 STREET ADDRESS PALM BAY FL 32909 2. 4 CITY - ST - ZIP CITY - ST - 2IP DELETE Change Addition 3 1 TITLE TITLE NAME 3.2 NAM( STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE 4171111 Change Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-7(P 5.4 C(1) - ST - Z(P DELETE Change Addition 6.1 THLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CiTY-ST-ZIP

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this innual report or supplemental annual report is fine and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of 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 attachnicipt with an address in

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