


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 19 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # J39026 (6)</b> 1. Corporation Name <b>AMERICAN TECHNICAL COATINGS CORPORATION</b>					
Principal Place of Business <b>192 CENTER ST. CAPE CANAVERAL FL 32920 US</b>			Mailing Address <b>192 CENTER ST. CAPE CANAVERAL FL 32920 US</b>		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>10/16/1986</b>	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number <b>59-2746873</b>	Applied For Not Applicable
22 City & State	27	28 City & State	29	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23 Zip	25 Country	28 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
9. Name and Address of Current Registered Agent <b>MCARA, ROBERT C. 580 HIDDEN HOLLOW MERRITT ISLAND FL 32920</b>			10. Name and Address of New Registered Agent 81 Name <b>ROBERT BEALS, ESQUIRE</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>1800 W. HIBISCUS</b> 83 P.O. Box <b>1870</b> 84 City <b>MELBOURNE</b> FL 85 Zip Code <b>32901</b>		
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 <i>[Signature]</i> DATE <b>5/19/98</b> (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	<input type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCARA, ROBERT C.		12 NAME	U. P.	
STREET ADDRESS	580 HIDDEN HOLLOW		13 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	TD	<input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HRADESKY, EDWARD L.		22 NAME		
STREET ADDRESS	124 ST. CROIX AVENUE		23 STREET ADDRESS		
CITY-ST-ZIP	COCOA BEACH FL		24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	SD	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EMORY, JAMES E.		32 NAME		
STREET ADDRESS	5120 PINTAIL LANE		33 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	D	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ZACCARO, THOMAS W.		42 NAME		
STREET ADDRESS	200 S BANANA RIVER BV		43 STREET ADDRESS		
CITY-ST-ZIP	COCOA BCH. FL		44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			52 NAME	PRES. JOHN J. MORRIS	
STREET ADDRESS			53 STREET ADDRESS	1370 YORK CIRCLE	
CITY-ST-ZIP			54 CITY-ST-ZIP	MELBOURNE, FL 32904	
TITLE		<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

SIGNATURE: *[Signature]*

5/19/98

407-783-8474

CR2E034 (10/97)