


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J95472</b> 1. Entity Name ACR PROCESS EQUIPMENT, INC.	
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Principal Place of Business 788 SILVERWOOD DR. LAKE MARY, FL 32746	Mailing Address 788 SILVERWOOD DR. LAKE MARY, FL 32746
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<b>DO NOT WRITE IN THIS SPACE</b>
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03162004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2864032	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  RUBENS, ALFRED C. 788 SILVERWOOD DR. LAKE MARY, FL 32746
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000092953 03/19/04-80029-016 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RUBENS, ALFRED C. 788 SILVERWOOD DR. LAKE MARY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS RUBENS, KAREN A. 788 SILVERWOOD DR. LAKE MARY, FL
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Alfred C. Rubens **3/16/04 407-321-5115**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #