

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 22 AM 8:45

DOCUMENT # K95022 (5)

1. Corporation Name

ACME MOBILE LOCKSMITH SERVICE, INC.

Principal Place of Business

Mailing Address

% JOHN E MCNTEE
1721 EVERGREEN ST./P.O. BOX 421460
KISSIMMEE FL 34742

% JOHN E MCNTEE
1721 EVERGREEN ST./P.O. BOX 421460
KISSIMMEE FL 34742

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/06/1989

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21 1612 13TH Street

Suite, Apt. #, etc.

22

City & State

23 St. Cloud Florida

Zip

24 34761

Country

25 Oseceola

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

59-2951545

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

7. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RASSLER, JEFFREY L.
1721 EVERGREEN ST
KISSIMMEE FL 34746

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 14 if changed, or on an attachment with an address.

15. SIGNATURE: *Jeffrey L. Rassler*

16. DATE: 6/1/95

17. TIME: 4:07 PM

18. OFFICE: 933-1107

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CR02034 (3/95)