## 2007 FOR PROFIT CORPORATION

## **ANNUAL REPORT**

DOCUMENT # P01000090609

1. Entity Name ACME PLATING INC.

Principal Place of Business Mailing Address

201 INTERNATIONAL DR., #225 CAPE CANAVERAL, FL 32920

NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP TITLE

201 INTERNATIONAL DR., #225 CAPE CANAVERAL, FL 32920

## **FILED** Feb 15, 2007 08:00 Al Secretary of State



IN THIS SPACE

DO NOT WRITE IN THIS SPACE				01312007	01312007 No Chg-P CR2E034 (11/05)			
C.	O NOI WRITE II	N I HIS SPAI	JE	4. FEI Numb 52-234			Applied For Not Applicable	
					<del></del>	\$8.75 Fee Req	Additional	
	6. Name and Address of Current Regis	stered Agent						
OLTARZEWSKI, FRANK J 201 INTERNATIONAL DR., #225 CAPE CANAVERAL, FL 32920			DO NOT WRITE IN THIS SPACE					
	<u> </u>							
the obligat	named entity submits this statement for the pions of registered agent.  Signature, typed or printed name of registered agent and bile				th, in the State of Florida		ith, and accept	
	Signature, typed or printed reame or registered agent and site	IT APPRICADES (NC/12: Hegistered	Ageni signature	required when reinstating)		DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		<ol> <li>Election Campaign Finan- Trust Fund Contribution.</li> </ol>	cing	\$5.00 May Be Added to Fees				
10	OFFICERS AND DIREC	CTORS	<u> </u>			<del></del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLTARZEWSKI, FRANK J 201 INTERNATIONAL DR., #225 CAPE CANAVERAL, FL 32920		,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				·	00000063 02/26/07~80	6744 033-005	150.00	
TITLE NAME								
STREET ADDRESS CITY-ST-ZIP				DO	<b>NOT WR</b>	ITE		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 eath; 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 trank 1. Ottorseus?	FRANK J. OLTARZ	EWSK(	2/10/07 321453	3706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR	Date	Daytme Phone #	1 -