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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF S

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000024484 (6)

ACME ROCKET, INC.

FILED May 11 1998 8:00am Secretary of State



						-{			11 4 7 81 10 8 1
Principal Place of Business Mailing Address								*****	
2100 NE 121 (NORTH MIAMI		2100 NE 121 RD. NORTH MIAMI FL 33181			DO 1107 1470	TC 154 T1 110 A	D. O.C.		
					DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified	י		
6 Deimale at Di	ace of Business	Do Maillian Addison				04/01/1993		11.	
_	ace of Business	2a. Mailing Address				4. FEI Number		<u> </u>	plied For
21	A -1-	26				1 00 0001001			t Applicable
Suite, Apt. +	W, BIG.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75		
22		27						Fee Re	
City & State	.	City & State				6. Election Campaign Financing	П	\$5.00	
23	Canala	Zip Country				Trust Fund Contribution		Added 1	
Zip				niry		8. This corporation owes or has	·		_ ~ .
24	9. Name and Address of Current	29	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
		Registered Agent		81	Name	10. Name and Address of New	redisteled (agent	
BENDER, HARRY K				•	Haine				
BENDER, BENDER & CHANDLER, P.A.				82	Street Addre	ss (P.O. Box Number is Not Accept	able)		
5915 PONCE DE LEON BLVD., STE. 60			ļ						
CORAL GABLES FL 33146				83					ļ
			•	84	City	· · · · · · · · · · · · · · · · · · ·		85 Zip (Code
					•		FL		
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: typod or printed nence of registered agent and title if applicable: [NOTE: Registered Agent signature required when reinstating) DATE DATE									
Signature, typoid or printed name of registered agent and title if applicable. [NOTE: 12. OFFICERS AND DIRECTORS				Hagistered Agent signature requir		ADDITIONS/CHANGES TO OF	DATE	DIDECTOR	C IN 12
TITLE				1.1 TITLE		ADDITIONS/CHANGES TO OF	ICENS AND	Change	Addition
								TI CHENDO	
NAME	MEXNER, R.C.			1.2 NAME					Į
STREET ADDRESS	2100 NE 121 RD.			1.3 STREET ADDRESS					[
City-St-ZIP	NORTH MIAMI FL 33181			1.4 CITY - ST - ZIP					I Adams
TITLE	\$	☐ DELETE						Change	☐ Addition
NAME	BENDER, HARRY K.			2.2 NAME					
STREET ADDRESS				2.3 STREET ADDRESS					
CITY-ST-ZIP	the state of the s			ITY-S	T-ZIP				
TITLE	PD DELETE			3.1 TITLE				☐ Change	Addition
NAME	MEIXNER, RONALD C								į
STREET ADDRESS	2100 NE 121 RD.			REET	ADDRESS				į.
CITY-ST-ZIP	NORTH MIAMI FL 33181			3.4. CITY-ST-ZIP					ļ
TITLE				4.1 TITLE				Change	Addition
NAME			4. 2 N	4. 2 NAME					
STREET ADDRESS			4.3 ST	4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4.01	4.4 CITY - ST - ZIP					
TITLE	☐ DELETE			5.1 TITLE				Change	Addition
NAME			5.2 NA					-	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.4 CI						
TIFLE		☐ DELETE	6.1 717		1 - ¢1F			Change	Addition
l l		C) beccie			1				
NAME				6.2 NAME 6.3 STREET ADDRESS					
STREET ADDRESS			6.3 ST	REET.	ADDRESS				

14. 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 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 13 if changed, or on an attachment with an address.

SIGNATURE.

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4/130/98