Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90046 030 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000052593

1. Corporation Name

ACME INTERNATIONAL, INC.

Principal Place	of Business	Malling Address							
4141 N. YOUNG PKWY		4141 N. JOHN YOUNG PKWY							
SUITE 5	• • • • • • • • • • • • • • • • • • • •	SUITE 5							
ORLANDO FL 3	2804	ORLANDO FL 32804				DO NOT WRITE IN THIS SPACE			
US		US				3. Date Incorporated or Qualifed			
						07/23/1993		(	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Apr	tied For	
	ago of Busiliess	<b>-</b>				59-3194382	<del></del>	Applicable	
21		26						dditional	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					ee Rec		
22								<del></del>	
. City & State		City & State						May Be	
23		28				Trust Fund Contribution Ad	ided to	Fees	
Zip	- Country	Zip	Zip Country			8. This corporation owes the current year Intangible		_	
24	25 29 30		30			Personal Property Tax.	s (	□No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
				81	Name				
CHA									
	N. JOHN YOUNG PKWY				Street Add	dress (P.O. Box Number is Not Acceptable)			
	• • • • • • • • • • • • • • • • • • • •								
SUIT	<del>-</del> : .			83				1	
ORL	ANDO FL 32804			84	Cit.	85	Zip C	ode	
				04	City	FL  °°	2.p 0	000	
44. Durant to the purpose of Captions 507 0503 and 507 1508. Elevidos the above parent corporation submits this statement for the purpose of changing its register.									
office or registered agent, or both, in the State of Florida, Shich change was altitionized by the corporation's poard of directors, i neleby 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 title if applicable. (NOTE: Registere					t signature requi	uired when reinstating) OATE ·		-5 111 45	
12.				13.		ADDITIONS/CHANGES TO OFFICERS AND DIRI		_	
TITLE	DP DELETE		1.1 TD	1.1 TITLE		☐ Ch	ange	☐ Addition	
NAME	YEN, MING		1.2 N	1.2 NAME					
STREET ADDRESS	976 FLORIDA CENTRAL PKWY, SUITE 112		1.3 STREE		ADDRESS				
			1	1.4 CITY-ST-ZIP					
CITY-ST-ZIP			_		1-21		ance	Addition	
TITLE	_		2.1 11		1		Lg0		
NAME	011/11/03 11/1201011		2.2 N	WE					
STREET ADDRESS	976 FLORIDA CENTRAL PKWY, SUITE 112 23		2.3 ST	REE!	ADDRESS	•			
CITY-ST-ZIP	LONGWOOD FL 32750 2		2.4 C	2. 4 CITY-ST-ZIP					
TITLE	DST DELETE 3.1		- 3.1 TI	TLE		Ch	ange	☐ Addition	
NAME	CHANG, HWALYU 32		3.2 NA	ME				· ·	
, ,					r address			,	
STREET ADDRESS	l =	JUNE 112							
CITY-ST-ZIP	LONGWOOD FL	(7) per	_		IT-ZIP		2000	Addition	
TITLE	P	☐ DELETE	4.1 π	ILE		<u> </u>	ange		
NAME	CHANG, HARRY		4. 2 N	AME		,		1	
STREET ADDRESS	4141 N. JOHN YOUNG PKWY 4.35		4.3 ST	REET	ADDRESS			}	
CITY-ST-ZIP	ORLANDO FL 32804 440		4.4 CI	TY-SI	T-ZIP			}	
TITLE	ST DELETE 5.17				□ Ch	ange	☐ Addition		
NAME	CHANG, MARTHA								
l	CHANG, MANITA		5381	REFT	FADDRESS				
STREET ADDRESS	255 4141 14. 301114 100110 1 1041				- 1				
CITY-ST-ZIP	CHEANDO LE SECOT		5.4 CI		1-212				
TITLE		☐ DELETE	6.171			☐ Ch	ange	☐ Addition	
NAME 62 N			6.2 N/	ME				ł	
STOCET ADDOCCO			6.3 \$1	REES	ADDRESS			Ţ	

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 at with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP