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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P93000064916 (8)

ADAMS ATOMIC ENGINES, INC.

Principal Plac 345 WATERFO TARPON SPRIN	RD CIR E	POB 1017	Mailing Address POB 1017 TARPON SPRINGS FL 34688-1017					
						3. Date Incorporated or Qualified 09/13/1993	3a. Date of t	
2. Principal F	lace of Business	2a. Mailing A	2e. Mailing Address			4. FEI Number	<u>'</u>	Applied For
21		26				59-3203158 Not Applica		
Suite, Apt		27				5. Certificate of Status Desired	1 7 -	.75 Additional ee Required
City & Stat	е	City & Sta	ate			Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees
Zip 24	Country 25	7ip 29	3	Count	ry	8. This corporation has liability for i	intangible tax ur Yes No	nder s. 199.032,
	9. Name and Address of Curr	rent Registered Age	nt			10. Name and Address of New Re	gistered Agent	
11. Pursuant	PON SPRINGS FL 34689 to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the obj	ate of Florida. Such c ligations of, Section 6	hange was au 607.0505, Flor	s, the about the state of the s	4 City ve-named colory the corpora	rporation submits this statement for the pation's board of directors. I hereby accepaired when reinstating)	FL 85	Zip Code ging ils registered ant as registered
12.		ND DIRECTORS	- INOIE	13.	gent signature requ	ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS ADAMS, RODNEY M. 345 WATERFORD CIRCLE E. TARPON SPRINGS FL.		DELETE	1.1 TITLE 1.2 NAM	ET ADDRESS	ASSITEMAÇI (MICES TO OFFICE	□ Cr	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT ADAMS, JANICE L. 345 WATERFORD CIRCLE E. TARPON SPRINGS FL.	_	DELETE	2.1 TIPLE 2.2 NAM 2.3 STRE 2.4 CITY	ET ADDRESS		Cr	nange Addilio
TITLE NAME STREET ADDRESS CITY-ST-ZIP			J DELETÉ	3.1 TITLE 3.2 NAME	ET ADDRESS		□ Cr	nange Additio
TITLE			DELETE	4.1 TITLE			C	nange Additio

64 CITY-S1-ZIP

14. I do hereby certify that the information supplied with this filing does not quality 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 apputatechment with an address.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 T(TL€

6.2 NAME

DELETE

DELETE

4.3 STREET ADORESS

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 C(1Y - S1 - Z(P

4.4 CITY - ST - ZIP

CICNISTION

NAME

TITLE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

4/11/00

812-947-4089

Change

Change

Addition

Addition

FILED

Apr 28 1997 8:00am

Secretary of State