

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

FILED
Apr 16 1997 8:00am
Secretary of State

DOCUMENT # P95000016973 (6)

1. Corporation Name

~~AMERICAN COMMUNICATIONS TECHNOLOGIES, INC.~~
AMERICAN COMMUNICATION TECHNOLOGIES, INC.

Principal Place of Business

5601 WINDOVER DRIVE
ORLANDO FL 32819

Mailing Address

7450 COMMON SAND LAKE BLVD.
ORLANDO FL 32819

3. Date Incorporated or Qualified

02/27/1995

3a. Date of Last Report

08/01/1996

4. FEI Number

65-0563511

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 7450 Sandlake Commons Blvd

27 Suite, Apt. #, etc.

27 City & State

28 Orlando FL 32819

29 Zip

Country

30 32819

30 USA

9. Name and Address of Current Registered Agent

SOUTH, TODD J., ESQ.
2899 LEE ROAD
SUITE 120
WINTER PARK FL 32789

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME PERKINS, JERRY E.
STREET ADDRESS 1013 S. HIAWASSEE RD #3617
CITY-ST-ZIP ORLANDO FL 32835

TITLE V ☐ DELETE
NAME DE LOZIER, JOHN L., III
STREET ADDRESS 612 BRYN MAWR STREET
CITY-ST-ZIP ORLANDO FL 32804

TITLE S/T ☒ DELETE
NAME CHEUNG, DAVID W.
STREET ADDRESS 1013 S. HIAWASSAA RD. #3617
CITY-ST-ZIP ORLANDO FL 32835

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Treasurer, Director ☐ Change ☒ Addition
1.2 NAME Perkins, Jerry E.
1.3 STREET ADDRESS 1013 S. Hiawassee Rd #3617
1.4 CITY-ST-ZIP Orlando FL 32835

2.1 TITLE Secretary, Director ☐ Change ☒ Addition
2.2 NAME De Lozier, John L., III
2.3 STREET ADDRESS 612 Bryn Mawr Street
2.4 CITY-ST-ZIP Orlando FL 32804

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/97
Date

407-351-3561
Daytime Phone #

CR2E034 (9/96)