

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91188 032 ***150.00

DOCUMENT # P95000044426

1. Entity Name
ACRO-TEK COMMUNICATIONS, INC.



Principal Place of Business
13464 85 RD NORTH
WEST PALM BEACH FL 33412
US

Mailing Address
13464 85 RD NORTH
WEST PALM BEACH FL 33412
US

2. Principal Place of Business

2121 4TH AVENUE N

Suite, Apt. #, etc.

B

City & State

LAKE WORTH, FL

Zip

33461

Country

USA

3. Mailing Address

2121 4TH AVENUE N

Suite, Apt. #, etc.

B

City & State

LAKE WORTH, FL

Zip

33461

Country

USA



☒ **CHECK HERE IF MAKING CHANGES**

4. FEI Number 65-0587632

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ADER, DIANE

13464 85 RD NORTH

W PALM BCH FL 33412

7. Name and Address of New Registered Agent

Name

JEFFREY HOGUE

Street Address (P.O. Box Number is Not Acceptable)

2121 B 4TH AVENUE N

City

LAKE WORTH

FL

Zip Code

33461

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Jeffrey M. Hogue

(NOTE: Registered Agent signature required when reinstating)

3-14-03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **ST** ☒ Delete
NAME **ADER, DIANE**
STREET ADDRESS **13464 85 RD NORHT**
CITY-ST-ZIP **W PALM BCH FL**

TITLE **P** ☒ Delete
NAME **ADER, WALTER**
STREET ADDRESS **13464 85 RD NORTH**
CITY-ST-ZIP **W PALM BCH FL**

TITLE **V** ☐ Delete
NAME **HOGUE, JEFFREY**
STREET ADDRESS **9911 CROSS PINE CT**
CITY-ST-ZIP **LAKEWORTH FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME **JEFFREY HOGUE**
STREET ADDRESS **9911 CROSS PINE CT**
CITY-ST-ZIP **LAKE WORTH FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeffrey M. Hogue

DATE

3-14-03

561-533-1155

Daytime Phone #

CR2E034 (10/02)