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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000050265 (3)

A.C.G.S.E., INC.

Principal Place of Business	Mailing Addre

FILED May 05 1998 8:00am Secretary of State



Suite, Apt. #, etc.	8085 NORTH ATLANTIC AVENUE 8085 NORTH ATLANTIC AVENUE CAPE CANAVERAL FL 32920 CAPE CANAVERAL FL 32920		DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 2. Mailing Address 4. FEL Number Applied For Suite, Apr. #, etc. 56. State 59.3396990 Not Applied For Suite, Apr. #, etc. 50.00 May Business 59.3396990 Not Applied For Suite, Apr. #, etc. 50.00 May Business 59.00 May Business						******		
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Zip		#, etc.	 			5. Certificate of Status Desired		
Zip Country 7ip Country 28		9	<u>-</u> -¬ ·					
GREENFIELD, HARRY C 800 E. MERRITT ISLAND CAUSEWAY 4202 MERRITT ISLAND F1 32952 11. Pursuant to the provisions of Socious 607 0502 and 607 1508. Florids Statutes office or registered agont or both, in the State of Hondia Socious 607 0505. Florida Statutes SIGNATURE 12. OF FICERS AND DIFF CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFF CTORS 11. TITLE PD DELETE 11. TITLE PD DELETE 11. SHREET ADDRESS 0808 S NORTH ATLANTIC AVENUE CITY-ST-2PP CAPE CANAVERAL F1 32920 14. OFFICERS AND DELETE 2.3 SIRRET ADDRESS 08770 RIDGEWOOD AVE CITY-ST-2PP COCOA BEACH F1 3. SIRRET ADDRESS 08770 RIDGEWOOD AVE COCOA BEACH F1 3. SIRRET ADDRESS 08770 RIDGEWOOD AVE COCOA BEACH F1 3. SIRRET ADDRESS 08770 RIDGEWOOD AVE COCOA BEACH F1 3. SIRRET ADDRESS 08770 RIDGEWOOD AVE COCOA BEACH F1 3. SIRRET ADDRESS 08770 RIDGEWOOD AVE COCOA BEACH F1 3. SIRRET ADDRESS 08770 RIDGEWOOD AVE COCOA BEACH F1 3. SIRRET ADDRESS 08770 RIDGEWOOD AVE COCOA BEACH F1 3. SIRRET ADDRESS 08770 RIDGEWOOD AVE COCOA BEACH F1 4. 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		├ ─┐	— ·		iry	· · · · · · · · · · · · · · · · · · ·		
BOD E. MERRITT ISLAND CAUSEWAY #202 MERRITT ISLAND FL 32952 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL 85 Zip Code 11. Pursuant to the provisions of Socious 507 0502 and 507 1508. Florida Stalutes, the above-named corporation submits this statement for the purpose of changing its registe office or registered agont, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registe agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE Signature, byte dor preliad registered ingred into their displacement of present registered agent agent agent and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD ORAGE GIBSON, JASON 12 NAME GIBSON, JASON 13 STREET ADDRESS CITY-51-72P CAPE CANAVERAL FL 32920 DELETE 13 TITLE VSTD ORAGE 14 DIRECTORS 15 A DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CAPE CANAVERAL FL 32920 DELETE 22 NAME GIBSON, LISA 3085 NORTH ATLANTIC AVENUE CAPE CANAVERAL FL 32920 DELETE 31 TITLE NAME GIBSON, CAROLE 32 NAME GIBSON, CAROLE 37 NAME GIBSON, CAROLE 47 RIDGEWOOD AVE COCOA BEACH FL DELETE DELETE ALTHER NAME STREET ADDRESS COCOA BEACH FL DELETE 41 TITLE NAME STREET ADDRESS COCOA BEACH FL A STREET ADDRESS		9, Name and Address of Curr	ent Registered Agent				d Agent	
### City	GF	REENFIELD, HARRY C		[8	1 Name			
### City FL 85 Zip Code			NAY	8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607 0502 and 607 1506. Florida Statutes, the above-named corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. Thereby accept the appointment as register agent, and familiar with, and accept the obligations of, Section 607 0505. Florida Statutes SIGNATURE Total				6	3			
Agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature Signature Defendence of registered agent and blook applicable. (NOTE Registered Agent signature required when reinstating) DATE	i			8	4 City	F	85 Zip	Code
Signature, typed or periled name of repubrical agent and title of applications CNOTE Registerica Agent signature required when reinstating) DATE	11. Pursuant office or re agent. I a	to the provisions of Sections 607.09 egistered agent, or both, in the Sta m familiar with, and accept the obt	502 and 607.1508, Florida Statul te of Florida Such change was gations of, Section 607.0505, Fl	es, the abo authorized orida Statut	ove-named col by the corpora es	rporation submits this statement for the purpose alion's board of directors. I hereby accept the ap-	of changing it pointment as	ts registered registered
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I nelegy below that not minimized supplied with this time does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 attachaged with an address.

CARRIE GIRSON