

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortnam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S63469** (8)

1. Corporation Name  
**ROCKET MARINE, INC.**



Principal Place of Business: **448 W. DONEGAN AVE, KISSIMMEE FL 34741**  
Mailing Address: **448 W. DONEGAN AVE, KISSIMMEE FL 34741**

3. Date Incorporated or Qualified: **07/01/1991**  
3a. Date of Last Report: **03/20/1995**

2. Principal Place of Business: **5368 WHISPERING PINE CIRCLE**  
2a. Mailing Address: **5368 WHISPERING PINE CIRCLE**

4. FEI Number: **59-3072158**  
Applied For:  Not Applicable

22. City & State: **ST CLOUD FLORIDA**  
27. City & State: **ST CLOUD FLORIDA**

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

23. Zip: **34771** Country: **US**  
28. Zip: **34771** Country: **US**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**CARROLL, TERRI D.  
448 W. DONEGAN AVENUE  
KISSIMMEE FL 34741**

10. Name and Address of New Registered Agent  
81. Name:  
82. Street Address (P.O. Box Number is Not Acceptable): **5368 WHISPERING PINE CIRCLE**  
83. City: **ST CLOUD** FL 85. Zip Code: **34771**

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: *Terri D Carroll* **TERRI D CARROLL** DATE: **06/14/96**

12. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> DELETE
NAME	CARROLL, TERRI D	
STREET ADDRESS	448 W DONEGAN AVE	
CITY - ST - ZIP	KISSIMMEE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CARROLL, TERRI D	
STREET ADDRESS	448 W DONEGAN AVE	
CITY - ST - ZIP	KISSIMMEE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>5368 WHISPERING PINE CIRCLE</b>
1.4 CITY - ST - ZIP	<b>ST CLOUD FL 34771</b>
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>5368 WHISPERING PINE CIRCLE</b>
2.4 CITY - ST - ZIP	<b>ST CLOUD FL 34771</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 an attachment with an address.

SIGNATURE: *Terri D Carroll* **TERRI D CARROLL** DATE: **06/14/96** 407 957 4000

CR2E034 (12/95)