

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 213793

Entity Name: ACE PRINTING, INC.

FILED  
Jun 30, 2005  
Secretary of State

**Current Principal Place of Business:**

54 N.W. 11TH STREET  
MIAMI, FL 33136

**New Principal Place of Business:**

**Current Mailing Address:**

54 N.W. 11TH STREET  
MIAMI, FL 33136

**New Mailing Address:**

2444 NW 7 PLACE  
MIAMI, FL 33127

FEI Number: 59-0855424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CERRATTO, MARIO  
54 N.W. 11TH STREET  
MIAMI, FL 33136 US

**Name and Address of New Registered Agent:**

STORMONT, RAY C  
2444 NW 7 PLACE  
MIAMI, FL 33127 US

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.

SIGNATURE: RAY C. STORMONT

06/30/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CERRATTO, MARIO  
Address: 54 N.W. 11TH STREET  
City-St-Zip: MIAMI, FL 33136

Title: VPT (X) Delete  
Name: JORGE, CIRA  
Address: 54 N.W. 11TH STREET  
City-St-Zip: MIAMI, FL 33136

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: STORMONT, RAY C  
Address: 2444 NW 7 PLACE  
City-St-Zip: MIAMI, FL 33127

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAY C. STORMONT

PSTD

06/30/2005

Electronic Signature of Signing Officer or Director

Date