

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 626312 (3)  
1. Corporation Name  
**ACE WRECKERS SALES AND SERVICES INC.**



Principal Place of Business Mailing Address  
1125 BURLINGTON ST. OPA LOCKA FL 33054 1125 BURLINGTON ST. OPA LOCKA FL 33054

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 15699 West Dixie Hwy.		26 SAME		06/18/1979	12/26/1995
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	Applied For
23 North Miami Beach, FL		28 City & State		59-1915852	Not Applicable
24 33161		25 U.S.A.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
29		30		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199.032 Florida Statutes				8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SEAY, GISELA 12101 SAILBOAT WAY COOPER CITY FL 33054				81 Name Ronald J. Isriel, Esquire			
				82 Street Address (P.O. Box Number is Not Acceptable) 20801 Biscayne Boulevard - 4th Floor			
				83 Aventura, Florida 33180			
				84 City			
				FL 85 Zip Code 33180			

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: *Ronald J. Isriel* 6/18/96  
Signature typed in printed name of registered agent, and title, if applicable. (NOTE: Registered Agent's signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	President/Director
NAME	SEAY, GISELA	12 NAME	Donald Seay
STREET ADDRESS	12101 SAILBOAT WAY	13 STREET ADDRESS	15699 West Dixie Highway
CITY-ST-ZIP	COOPER CITY FL 33026	14 CITY-ST-ZIP	North Miami Beach, FL 33161
TITLE		21 TITLE	
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Donald Seay* 6/18/96 (305) 947-1100  
Signature typed in printed name of signing officer or director DATE

CR2E034 (3/96)