## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 29 1998 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 507710

(2)

ACE INTERIORS, INC.

STREET ADDRESS

CITY-ST-ZIP

							<u> </u>	
Principal Place of Business Mailing Address						AT WINE A DINA NOOMA NI DI		
33 SOUTH FEDERAL HIGHWAY DEERFIELD BCH FL 33441-4126 DEERFIELD BCH FL 33441-4126					DO NOT WRITE	E IN THIS SPACE		
					3. Date Incorporated or Qualified	. IN THIS SPACE		
					07/23/1976			
2. Principal Place of Business 2a. Mailing Address					4, FEI Number	<del></del>	Applied For	
21 26					59-1675203		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc						<b>S8.7</b>	75 Additional	
27					5. Certificate of Status Desired		e Required	
City & State City & State					6. Election Campaign Financing	\$5.	00 May Be	
23	28			Trust Fund Contribution Added to Fee.				
Zip	Country Zip Cour			ntry	8. This corporation owes or has paid the current year Intangible			
24	25 29 30 9, Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes No  10, Name and Address of New Registered Agent			
	<del></del>	iour signistration whatit		91 Name	IU. Name and Address of New Ke	Sistered Võent		
JOSEFFER, HOWARD								
33 SOUTH FEDERAL HIGHWAY				Street Add	dress (P.O. Box Number is Not Acceptable)			
DEERFIELD BCH FL				63		···	<del></del>	
				B4 City		FL 85 2	Zip Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607 1508. Florida Statut	es the ab	 ove-named con	poration submits this statement for the p		ng ite registered	
orrice or i	registered agent, or both, in the Standard agent the ob-	ate of Florida. Such change was a	authorized	by the corpora	poration submits this statement for the patients board of directors. I hereby accept	ot the appointment	t as registered	
_	or ramiliar with, and accept the op	iligations of, section 607.0505, Fit	maa Statu	tes.			İ	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOT	F Registered	Agent signature requi	ired when reinstating)	DATE		
12.		OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	TORS IN 12	
TITLE	PD			E		Chan	ige 🔲 Addition	
NAME	JOSEFFER, HOWARD		1.2 NAM	IE				
STREET ADDRESS			1.3 STR	EET ADDRESS				
CITY-ST-ZIP			1.4 CITY	'-ST-ZIP				
TITLE		DELEYE 2.1 T		E		Chang	ige Addition	
NAME	2.2		2.2 NAN	IE			1	
STREET ADDRESS			2.3 STR	EET ADDRESS			1	
CITY-ST-ZIP			2. 4 CIT	Y - ST - ZIP				
TITLE	DELETE 3.1 TO		3.1 T(T)	£		☐ Chan	ge 🔲 Addition	
NAME			3.2 NAN	ie			ļ	
STREET ADDRESS			3.3 STR	ET ADDRESS			İ	
CITY-ST-ZIP			3.4. CIT	r-ST-ZIP				
TITLE	☐ DELETE : 4.1 TII		4.1 TITL	• ]		☐ Chang	ge Addition	
NAME			4. 2 NA)	AE				
STREET ADDRESS			4.3 STR	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			l	
TITLE	·	☐ DELETE 5.1 Te		: <u> </u>		☐ Chang	ge Addition	
NAME			5.2 NAM	E				
STREET ADDRESS			5.3 STR	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY	- ST-ZIP			!	
TITLE		DELETE	6.1 TITL			☐ Chang	ge Addition	
NAME			6.2 NAM	E				

14. Thereby 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 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 13 if changed, or on an attachmed with an address.

6.3 STREET ADDRESS