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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #, F9700002072 (3)

PACIFIC ACE FOREX (USA) LTD., INC.

Principal Place of Business Mailing Address 9291 POINT CYPRESS DR. 9291 POINT CYPRESS DR. ORLANDO FL 32836 ORLANDO FL 32836 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>04/21/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For APPLIED FOR 59-3438915 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name A.G.C. CO. 200 S. ORANGE AVE., #2300 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 83 84 Zip Code 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 Signature, lyped or ported name of registered agont and tour if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ Change PSD DELETE 1.1 TITLE ☐ Addition TITLE DIO. A ROGELLO 1.2 NAME NAME 10/F UNITED CHINESE BK BLDG #31-37 DES VOEUX 1.3 STREET ADDRESS STREET ADDRESS **CENTRAL HONG KONG** 14 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-\$T-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby 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 reserver or trustee empewered 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.

3.3 STREET ADDRESS 3.4. CITY - ST - ZIP

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5 1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

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TITLE NAME

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May 04 1998 8:00am

Secretary of State