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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

MENT # **K9431**5

(4)

DOCUMENT #
1. Corporation Name

MACE & ASSOCIATES, INC.

Principal Place					DII BIBI DEBI WIDI DIDI BIDI BEBI IDD
Principal Place of Business Mailing Address 1710 14TH ST 1710 14TH ST					
1710 14TH ST TAMPA FL 33605 US		1710 14TH ST TAMPA FL 33605 US			
				3. Date Incorporated or Qualified 06/09/1989	3a. Date of Last Report 04/14/1995
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number	Applied For
1		26		59-2953288	Not Applicable
Suite, Apt. #	t, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Ody & State		6. Election Campaign Financing	
3		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 <sub>(p)</sub>	Country	8. This corporation has liability for	
4	25	29	30	Florida Statutes	□No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F	legistered Agent
			81 Name		
MACE, P			82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
1710 141			83		
TAMPA F	·L 33606		63		
			84 City		FL 85 Zip Code
44 Dura cat t	a the espicions of Contant FOX 050	O and FO7 1500 Finds State	due the share pared or w	oration submits this statement for the pur	
SIGNATURE _	Signature, 19 ed år pontest nar æst rege te edisage:	San to the faggin eller to the	વે <sup>0%</sup> માં લું કરેલાં કે Agent અંતુ તો તર તરો હ	erest with a transfer for a final fi	CATE
	OCCIOCAD AL		1 40	ADDITIONIC/OUTANIOEC TO OFF	JOE OC AND INDICATION INLES
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
12. TITLE	P		13. 1.1 DILE 12 NAME	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12 Change Addition
12. TITLE NAME	P MACE, PAULA	ND DIRECTORS	13. 1.4 Tole 12 NAME 13 STREET ADDRESS 7	ADDITIONS/CHANGES TO OFF	Change Addition
12. Title Name Street address	P	ND DIRECTORS	13. 1. UTILE 12 NAME 13 STREET ADDRESS 2. 14 CHY - S1 - 7-P	ADDITIONS/CHANGES TO OFF	ICERS AND DIFFE CTORS IN 12  Change Addition  33569
12. Intle Name Street address City - St - Zip	P MACE, PAULA 204 GENEET CT	ND DIRECTORS	13. 1. UTILE 12 NAME 13 STREET ADDRESS  14 CHY-SL-Z-P 2 UTILE	ADDITIONS/CHANGES TO OFF ADOI ST. FILAGREE CIVERVIEW , F.L.	Change
12.  ITTLE  VAME  STREET ADDRESS  CITY - ST - ZIP  UTLE	P MACE, PAULA 204 GENEET CT	ND DIRECTORS	1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 2 1.4 CHY-ST-ZP	ADDITIONS/CHANGES TO OFF 3001 ST. FILAGKEE GIVERVIEW, FL	Change
12.  ITTLE  VAME  STREET ADDRESS  CITY - ST - ZIP  TITLE	P MACE, PAULA 204 GENEET CT	ND DIRECTORS	1. TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY - ST - Z-P 2.1 TITLE	ADDITIONS/CHANGES TO OFF 3001 ST. FILASKEE CIVERVIEW , FL	Change
12.  ITTLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS	P MACE, PAULA 204 GENEET CT	ND DIRF CTORS  DELETE	1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 C/TY-ST-Z/P 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFF 3001 ST. FILABLES CIVERVIEW , F.C.	Change   Addition
12.  INTLE  VAME  STREET ADDRESS  CITY-ST-ZIP  UITLE  VAME  STREET ADDRESS  CITY-ST-ZIP	P MACE, PAULA 204 GENEET CT	ND DIRECTORS	1. LTITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 GITY-SL-Z-P 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 GITY-SL-ZIP 3.1 TRUE	ADDITIONS/CHANGES TO OFF	Change   Addition
12.  NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME	P MACE, PAULA 204 GENEET CT	ND DIRF CTORS  DELETE	1. 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 City-St-Z-P 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 City-St-ZiP 3.1 Title 3.2 NAME	ADDITIONS/CHANGES TO OFF	Change   Addition
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12. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS CITY - ST - ZIP	P MACE, PAULA 204 GENEET CT	ND DIAF CTORS  DELETE  DELETE	1. 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 City - St - Z.P 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 City - St - ZiP 3.1 Title 3.2 NAME 3.3 STREET ADDRESS 3.4 City - St - ZiP	ADDITIONS/CHANGES TO OFF	Change   Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P MACE, PAULA 204 GENEET CT	ND DIRF CTORS  DELETE	1. 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 City-St-Ze 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 City-St-Zip 3.1 Title 3.2 NAME 3.3 STREET ADDRESS 3.4 City-St-Zip 4.1 Title	ADDITIONS/CHANGES TO OFF	Change   Addition
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12.  ITTLE  NAME STREET ADDRESS CHY-ST-ZIP  TITLE  NAME STREET ADDRESS	P MACE, PAULA 204 GENEET CT	ND DIAF CTORS  DELETE  DELETE	1. LTITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZP 2 LTITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP 3 LTITLE 32 NAME 33 STREET ADDRESS 34 CITY ST - ZIP 4 LTITLE 42 NAME 43 STREET ADDRESS	ADDITIONS/CHANGES TO OFF	Change   Addition
12.  INTLE  NAME  STREET ADDRESS  DITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	P MACE, PAULA 204 GENEET CT	ND DIAF CTORS  DELETE  DELETE	1. 1 Title 12 NAME 13 STREET ADDRESS 14 CITY - ST - Z-P 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - Z-P 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST - Z-P 41 TITLE 42 NAME	ADDITIONS/CHANGES TO OFF	Change   Addition
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12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	P MACE, PAULA 204 GENEET CT	ID DINE CHORS   DELETE   DELETE   DELETE   DELETE	1. 1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - Z.P. 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP 5 1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP 6 1 TITLE 62 NAME	ADDITIONS/CHANGES TO OFF	Change   Addition
112.  THE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	P MACE, PAULA 204 GENEET CT	ID DINE CHORS   DELETE   DELETE   DELETE   DELETE	1. 1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - Z.P. 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP 5 1 TITLE 57 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP 6 1 TITLE	ADDITIONS/CHANGES TO OFF	Change   Addition   Addition   Change   Change   Change   Addition   Change   Cha

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-29.96 813-248-5333