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

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1. Corporation Name

DOCUMENT #

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ACF RI	HEPRINTERS	OF BREVARD.	INC

Supplementary Supplementar	ACE	BLUEPRINTERS OF BREV	/ARD, INC.				 				1
MELBOURNE FL 3201	Principal Place	of Business	Mailing Address						AN CIFE DI		
2. Process Place of Business 2a. Mailing Address 2b. Mailing A	MELBOUR		MELBOURNE FL 329								
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Suite Suit	2. Principal Pl	ace of Business	2a. Mailing Address	 .			4. FEI Number				7
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City & State	Suite, Apt.	#, etc.					5. Certificate of Status Desired	П			
25	22 Care B. Care										_
Zo		e									
Section Sect		Country		Cour	ntr.						4
Name and Address of Current Registered Agent		 		—	ni y				t under s	199.032,	
NEWELL, JOHN C. 2239 S. BABCOCK ST.				1001					gent		\dashv
2239 S. BABCOCK ST. MELBOURNE FL 32901 8 Orly FL 85 Zp 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 at tergetared of or registered agent, or both, in the State of Florids. Such change was authorized by the carporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Thords Statutes, and section of the obligations of, Section 607.0505. Thords Statutes, and section of the obligations of, Section 607.0505. Thords Statutes, and section of the obligations of, Section 607.0505. Thords Statutes, and section of the obligations of, Section 607.0505. Thords Statutes, and section of the obligations of, Section 607.0505. The obligation of the section of the carporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent. I am familiar the section of the section of the obligation of the section of the section of the section of the carporation's board of directors. I hereby accept the appointment as registered agent. I am familiar the section of the					81	Name					-
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MELBOURNE FL 32801					DZ :	Street Addres	s (r.o. Box number is not Acceptable	3)			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's ubmits this statement for the purpose of Changing its registered agent, or both, in the State of Roida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar within, and accept the obligations of, Section 607.0565, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar within, and accept the obligations of, Section 607.0565, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar within, and accept the obligations of, Section 607.0565, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar within, and accept the obligations of, Section 607.0565, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar within, and accept the obligations of, Section 607.0565, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar within, and accept the obligation's board of directors. I hereby accept the appointment as registered agent. I am familiar within and accept the purpose of provided familiar accepts agent. I am familiar within a familiar registered of directors. I hereby accept the appointment as registered agent. I am familiar registered of directors. I hereby accept the appointment as registered agent. I am familiar registered of directors. I hereby accept the appointment as registered agent. I am familiar registered of directors. I hereby accept the appointment as registered agent. I am familiar registered of agent. I am familiar regis				į.	63						1
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14. Ldo hereby certify that the information supplied with this time is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I further		w cortify that the information a malia	Y with this filing is valuated of				the exemption stated in Costine 440.0	7/2\(1.) [1.]	ido Otata	an 16.45	4

receipt year memory certify that the information supplied with this fining 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 suppliemental 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JOHN WEWELL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF DIRECTOR WILL!