

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L83459** (2)

1. Corporation Name
PACIFIC ACE CORPORATION



Principal Place of Business: ~~A.G.C. CO. 2200 SUN BANK CENTER ORLANDO FL 32801-3432~~
Mailing Address: ~~A.G.C. CO. 200 SUN BANK CENTER ORLANDO FL 32801-3432~~

2. Principal Place of Business
21 **200 S. Orange Ave.**
Suite, Apt. #, etc
22 **Suite 2300**
City & State
23 **Orlando, FL**
Zip Country
24 **32801-3432**

2a. Mailing Address
26 **200 S. Orange Ave.**
Suite, Apt. #, etc.
27 **Suite 2300**
City & State
28 **Orlando, FL**
Zip Country
29 **32801-3432**

3. Date Incorporated or Qualified **06/27/1990** 3a. Date of Last Report **03/08/1995**
4. FEI Number **59-3019718** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
A.G.C. CO.
~~2000 SUN BANK CENTER ORLANDO FL~~

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
200 S. Orange Ave.
83 **Suite 2300**
84 City **Orlando** FL 85 Zip Code **32801-3432**

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 _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	DIO, ROGELIO A.	
STREET ADDRESS	8 QUEENS RD., CENTRAL, 9TH FLR	
CITY - ST - ZIP	SING PAO CENTER HO	
TITLE	VSTD	<input type="checkbox"/> DELETE
NAME	DIO, VIRGINIA S.	
STREET ADDRESS	8 QUEENS RD., CENTRAL, 9TH FLOOR	
CITY - ST - ZIP	SING PAO CENTER HO	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	8th-9th Floor, Sing Pao Centre
1.4 CITY - ST - ZIP	8 Queen's Road Central, HONG KONG
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	8th-9th Floor, Sing Pao Centre
2.4 CITY - ST - ZIP	8 Queen's Road Central, HONG KONG
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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AM 5-1-96

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Virginia S Dio* **Virginia S Dio/Vice President** **March 25, 1996**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

(852) 2524-9388