ANNUAL REPORT

Mar 03, 2006 8:00 am Secretary of State 2006 FOR PROFIT CORPORATION 03-03-2006 90104 023 ***150.00 DOCUMENT # P00000032113 ACE REALTY SERVICES INC. **AUDEDOO** Principal Place of Business Mailing Address 6175 NW 153 ST. 6175 NW 153 ST. **UNIT 115 UNIT 115** MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01302006 CR2E034 (11/05) Applied For City & State City & State 4. FEI Number Not Applicable 65-0995814 Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERNANDEZ, RODOLFO Street Address (P.O. Box Number is Not Acceptable) 7270 POICIANA COURT · MIAMI LAKES, FL 33014 Zip Code surpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named ent the obligations of r 01/30106 RESIDENT (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PSD TIFLE ☐ Change Addition TITLE ☐ Delete HERNANDEZ, RODOLFO NAME STREET ADDRESS STREET ADDRESS 7270 POINCIANA COURT CITY-ST-ZIP MIAMI LAKES, FL 33014 CITY-ST-ZiP VTD ☐ Delete Change ☐ Addition TITLE HERNANDEZ, ZOBEIDA A MARAE STREET ADDRESS 7270 POINCIANA COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES, FL 33014 TITLE ☐ Delete TITLE ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete THILE ☐ Change ___ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 district ampowed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appears with all other the empowered.

CITY-ST-ZIP

CITY-ST-ZIP

PRESIDENT

FILED