

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000084292

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** ACE AUTO AIR & AUTO CARE INC.

**Current Principal Place of Business:**

2120 SOUTH PINE AVENUE  
OCALA, FL 34471

**New Principal Place of Business:**

2120 SOUTH PINE AVENUE  
OCALA, FL 34471 US

**Current Mailing Address:**

2120 SOUTH PINE AVENUE  
OCALA, FL 34471

**New Mailing Address:**

2120 SOUTH PINE AVENUE  
OCALA, FL 34471 US

**FEI Number:** 65-1047314

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GONZALEZ, ROBERT J  
2120 S PINE AVENUE  
OCALA, FL 34474 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: GONZALEZ, ROBERT J PRES  
Address: 1801 S.W. 29TH TERRACE  
City-St-Zip: Ocala, FL 34474 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT J. GONZALEZ

PRES

02/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date