## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000096640

Entity Name: ACE SALES GROUP, INC.

FILED Apr 27, 2007 Secretary of State

	iidi AGE OAE	20 01(001 , 1110.			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
8249 NW 36 ST., STE 218 MIAMI, FL 33166 US			8245 NW 36 ST., ST DORAL, FL 33166	8245 NW 36 ST., STE 1 DORAL, FL 33166 US	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
8249 NW 36 ST., STE 218 MIAMI, FL 33166 US			8245 NW 36 ST., STE 1 DORAL, FL 33166 US		
FEI Number:	65-1141528	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
DIAZ, O J 7951 SW 4 MIAMI, FL	10 STREET ST 33155 US	E 206			
	named entity : e of Florida.	submits this statement for the բ	ourpose of changing its register	red office or registered agent, or both,	
SIGNATUF	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD ( ) DIAZ, ELISEO ( 5520 SW 147 F MIAMI, FL 331	PL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ( ) ESTEVEZ S, Cl 5425 SW 77 C MIAMI, FL 331	Г#209D	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	STD ( ) DIEGUEZ, ARIE 729 NW 21 CT MIAMI, FL 331		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELISEO L. DIAZ PD 04/27/2007