# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 20, 2005**
**Secretary of State**

DOCUMENT# P02000026083

**Entity Name:** ACE DESIGN STUCCO, INC.

**Current Principal Place of Business:**

1333 HAINES STREET
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

1333 HAINES STREET
JACKSONVILLE, FL 32206

**New Mailing Address:**

**FEI Number: 37-1420782** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MOROZON, VLADIMIR
12030 ANTIBES STREET
JACKSONVILLE, FL 32224 US

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

MOROZOV, VLADIMIR
4716 UNIVERSITY BLVD., NORTH
JACKSONVILLE, FL 32277 US

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: VLADIMIR MOROZOV 04/20/2005
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: MOROZOV, VLADIMIR
Address: 12030 ANTIBES ST
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete
Name: PALY, PAUL
Address: 621 W SURF SPRAY LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: PALY, NIKOLAY
Address: 3941 LOCHLAUREL DR
City-St-Zip: JACKSONVILLE, FL 32277

Title: D ( ) Delete
Name: PALY, EUGENE
Address: 139 OSPREY COVE LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VLADIMIR MOROZOV PD 04/20/2005
Electronic Signature of Signing Officer or Director Date