

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 31, 2005  
Secretary of State**

DOCUMENT# P02000039698

Entity Name: ACSE CORPORATION

**Current Principal Place of Business:**

9730 NW 4 STREET  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

9730 NW 4 STREET  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

FEI Number: 04-3647327      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MAIONE, MARIANA  
9730 NW 4 STREET  
PEMBROKE PINES, FL 33024      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: P      ( ) Delete  
Name: MAIONE, MARIANA  
Address: 9730 NW 4 STREET  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP      ( ) Delete  
Name: MARTIANEZ, DANIEL  
Address: 9730 NW 4 STREET  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: SEC      ( ) Delete  
Name: ALTUNA, PATRICIA  
Address: 1841 BAYBERRY DR  
City-St-Zip: PEMBROKE PINES, FL 33024

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

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

Title: VP      (X) Change ( ) Addition  
Name: LEON, DOMINGO  
Address: 7360 STERLING RD, APT0.204  
City-St-Zip: DAVIE, FL 33024

Title: SEC      (X) Change ( ) Addition  
Name: GRANDEZ, CLAUDIA  
Address: 1841 BAYBERRY DR  
City-St-Zip: PEMBROKE PINES, FL 33024

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: MARIANA MAIONE

P

07/31/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date