2007 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P03000094607

1. Entity Name AC OFFICE CORP.

Principal Place of Business

1500 SAN REMO AVE

SUITE 410 CORAL GABLES, FL 33146 Mailing Address

1500 SAN REMO AVE SUITE 410 CORAL GABLES, FL 33146

FILED Apr 16, 2007 08:00 A Secretary of State



DO	NOT	WRITE	: IN	THIS	SPA	1CE
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01042007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 80-0077025 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

EBIN, LINDA 825 BRICKELL BAY DRIVE **SUITE 1648** MIAMI, FL 33131-2920

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pations of registered agent.	ourpose of chang	ging its registered	office or re	egistered agent, or t	ooth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	ıl epplicable	(NOTE: Registered A	gent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00		Campaign Financi d Contribution.	ng	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			,	<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSCULLUELA, EUGENIO JR 1500 SAN REMO AVE SUITE 410 CORAL GABLES, FL 33146					
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of the cor	certify that the information supplied with this to this report or supplemental report is true proration or the receiver or trustee empowere, or on an attachment with an address, with a	d to execute this	report as require	nptions con re shall hav d by Chapt	ntained in Chapter 1 e the same legat eff er 607, Florida Stati	19, Florida Statutes. I further certify that the information fect as if made under oath; that I am an officer or director utes; and that my name appears in Block 10 or Block 11 if