## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000141958

1. Entity Name **ACES WILD INC** 



Principal Place of Business

1023 N DIXIE HWY WEST PALM BEACH, FL 33401 Mailing Address

1023 N DIXIE HWY

WEST PALM BEACH, FL 33401

## **FILED** Mar 28, 2006 8:00 am Secretary of State

03-28-2006 90134 023 \*\*\*150.00

50006454



02112006

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1748153 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

CLARKE, JOHN WEST PALM BEACH, FL 3340 9 Q

## DO NOT WRITE IN THIS SPACE

	he above named entity submits this statement for the purpose of char he obligations of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida.	I am familiar with, and accept
SIG	NATURE			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)		DATE

FILE NOW!!! FEE IS \$150.00 or May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

1, 2000 1 00 Will be 4000.00					
10.	OFFICERS AND DIRECTORS	_			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROEBUCK, JEFFREY 430 9TH STREET WEST PALM BEACH, FL 33401	_			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS					

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as it made under ooth; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Just nowsell