

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170989

FILED
Jan 23, 2012
Secretary of State

Entity Name: ACES RISK MANAGEMENT CORP.

Current Principal Place of Business:

6363 NW 6TH WAY
SUITE 425
FORT LAUDERDALE, FL 333096180

New Principal Place of Business:

1000 W MCNAB RD
POMPANO BEACH, FL 330694719

Current Mailing Address:

6363 NW 6TH WAY
SUITE 425
FORT LAUDERDALE, FL 333096180

New Mailing Address:

1000 W MCNAB RD
POMPANO BEACH, FL 330694719

FEI Number: 68-0598564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAIDER, AVRAHAM Z
6363 NW 6TH WAY
SUITE 425
FORT LAUDERDALE, FL 333096180 US

Name and Address of New Registered Agent:

NAIDER, AVRAHAM Z
1000 W MCNAB RD
POMPANO BEACH, FL 330694719 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:

01/23/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: MOCHE, EZRA S
Address: 1000 W MCNAB RD
City-St-Zip: POMPANO BEACH, FL 330694719

Title: PRES
Name: O'MALLEY, DAVID
Address: 1000 W MCNAB RD
City-St-Zip: POMPANO BEACH, FL 330694719

Title: CFO
Name: MOCHE, CHARLES M
Address: 1000 W MCNAB RD
City-St-Zip: POMPANO BEACH, FL 330694719

Title: CEO
Name: NAIDER, AVRAHAM Z
Address: 1000 W MCNAB RD
City-St-Zip: POMPANO BEACH, FL 330694719

I hereby 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 all other like empowered.

SIGNATURE: AVRAHAM Z NAIDER

CEO

01/23/2012

Electronic Signature of Signing Officer or Director

Date