2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000000414

Entity Name: NACE HOLDINGS, INC.

FILED Feb 13, 2007 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

1001 BRICKELL BAY DRIVE

SUITE 3112 MIAMI, FL 33131 1001 BRICKELL BAY DRIVE 9TH FLOOR

MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

1001 BRICKELL BAY DRIVE SUITE 3112

MIAMI, FL 33131

1001 BRICKELL BAY DRIVE

9TH FLOOR MIAMI, FL 33131

FEI Number: 20-4120465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLC CORPORATE SERVICES, INC. 1001 BRICKELL BAY DRIVE

SUITE 3112

MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MIGUEL FARRA, CPA 1001 BRICKELL BAY DRIVE 9TH FLOOR

MIAMI, FL 33131 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: MIGUEL FARRA

02/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete

Name: BODIN, PAUL

Address: 2121 PONCE DE LEON BLVD., SUITE 950

City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete

Name: Address: City-St-Zip: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

Name: MADDALOZZO, ELIO

Address: 1001 BRICKELL BAY DRIVE, 9TH FLOOR

City-St-Zip: MIAMI, FL 33131

Title: SD () Change (X) Addition

Name: MADDALOZZO, CORINA

Address: 1001 BRICKELL BAY DRIVE, 9TH FLOOR

City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ELIO MADDALOZZO PD 02/13/2007