


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 10, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000000108
 1. Entity Name
ACE PRODUCTS UNLIMITED, INC.



Principal Place of Business 7825 NW 72ND AVENUE MIAMI, FL 33166 US	Mailing Address C/O WILLIAM HARRIS 1711 N.W. 106 TERR. PEMBROKE PINES, FL 33026 US
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02022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0378549	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HARRIS, WILLIAM G
 7825 NW 72ND AVENUE
 MIAMI, FL 33166

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

U00000162446
 06/10/04-80005-007 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPS HARRIS, WILLIAM 1711 N.W. 106 TERRACE PEMBROKE PINES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT HARRIS, MARY 1711 NW 106TH TERRACE PEMBROKE PINES, FL
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	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William G. Harris William G. Harris 4/23/04 305 885-0816
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #