

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P93000031384 (9)

1. Corporation Name

AMERICAN CONTROL ENHANCEMENT, INC.

95 JAN 17 PM 12:06

Principal Place of Business

1841 NW 105TH AVE
PLANTATION FL 33322

Mailing Address

1841 NW 105TH AVE
PLANTATION FL 33322

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

04/28/1993

3a. Date of Last Report

07/19/1994

4. FEI Number

65-0413345

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRIEND, RICHARD E
201 ALHAMBRA CIR
SUITE 1200
CORAL GABLES FL 33134

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Print or Type (If printed, please print name and title of agent)

Print or Type (If printed, please print name and title of agent)

1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D - President
2. NAME	PEACOCK, GREGORY
3. STREET ADDRESS	1841 NW 105 AVE
4. CITY, ST., ZIP	PLANTATION FL 33322
5. TITLE	Vice President
6. NAME	Peacock, Marvin
7. STREET ADDRESS	1841 NW 105 Ave
8. CITY, ST., ZIP	Plantation, FL 33322
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST., ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST., ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST., ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST., ZIP	
5. TITLE	☐ Change ☒ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST., ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST., ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST., ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST., ZIP	

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct, and that I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes, and that my signature shall have the same legal effect as if made in person by the officer or director of the corporation or the officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 1a if changed, on an attached form with an address.

SIGNATURE:

SIGNATURE AND TYPE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-95 (305)448-553