FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 AUG -1 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000038161 (4)**

1. Corporation Name
ACE INVESTORS, INC.

Principal Place of Business	Mailing Address
850 NW 144 ST MIAMI FL 33168	850 NW 144 ST MIAMI FL 33168

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/27/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 4611 So. University Dr.	26 4611 So. University Dr.
Suite, Apt. #, etc 22 Suite 223	Suite, Apt. #, etc 27 Suite 223
City & State 23 Davie FL	City & State 28 Davie FL
Zip / Country 24 33328 / 25	Zip / Country 29 33328 / 30

4. FEI Number: 65-0425329 ☐ 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

9. Name and Address of Current Registered Agent

SILVERSTEIN, BARRY D
2999 NE 191 ST
SUITE 704
N MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent

81 Name: KEN KUZNIK
82 Street Address (P.O. Box Number is Not Acceptable): 4611 So. University Dr. Suite 223
83
84 City: DAVIE FL 85 Zip Code: 33328

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: KEN KUZNIK — 7/27/95
(Signature, typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE	PRES./SEC. TRES.	☒ Change ☐ Addition
NAME	LINTHICUM, DARLENE B	12 NAME	KEN KUZNIK	
STREET ADDRESS	850 NW 144 ST	13 STREET ADDRESS	4611 SO. UNIVERSITY DR. SUITE 223	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	DAVIE FL 33328	
TITLE	DVP	21 TITLE	DELETE	☒ Change ☐ Addition
NAME	KUZNIK, KEN	22 NAME	DARLENE B. LINTHICUM	
STREET ADDRESS	850 NW 144 ST	23 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP		
TITLE	DS	31 TITLE		☒ Change ☐ Addition
NAME	MCCLURE, KENNETH	32 NAME	DELETE KENNETH McCLURE	
STREET ADDRESS	850 NW 144 ST	33 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: KEN KUZNIK — 7/27/95 — (305) 962-8669
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

0104128 CP