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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000044802 (5)

ACE TRADING COMPANY, INC.

FILED Feb 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1221 BUTTONWOOD DR. 1221 BUTTONWOOD DR. FT. COLLINS CO 80525 FT. COLLINS CO 80525 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/21/1993 2, Principal Place of Business 2a, Mailing Address Applied For 4. FEI Number <u>59-3187371</u> Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes XXNo 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name OBST, EDWARD J 840 BERT ROAD 82 Street Address (P.O. Box Number is Not Acceptable) #131 JACKSONVILLE FL 32211 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and title Cap pleathle (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1 1 TITLE Change Addition **REINHOLD, RICHARD A SR** 12 NAME NAME 17700 25 MILE RD. 1.3 STREET ADDRESS STREET ADDRESS MACOMB MI 48042 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE REINHOLD, ROY A 2.2 NAM6 NAME 1221 BUTTONWOOD DR. STREET ADDRESS 2.3 STREET ADDRESS FT. COLLINS CO 80525 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition TITLE REINHOLD, MILDRED J 3.2 NAME NAME 17700 25 MILE RD. STREET ADDRESS 3.3 STREET ADDRESS MACOMB MI 48042 CITY-ST-ZIP 3.4. CITY - ST- ZIP DILETE Change Addition 4 1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELETE Change Addition 61 THLE TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing 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 logal 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 if changed, or on an att

Reinhold