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May 06 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000008058 (7)

1. Corporation Name:

ACE FORMAL WEAR AS ARMAS CORPORATION

Principal Place of Business

5927 HOLLYWOOD BLVD  
HOLLYWOOD FL 33021

Mailing Address

5927 HOLLYWOOD BLVD  
HOLLYWOOD FL 33021-8326

3. Date Incorporated or Qualified

01/24/1994

3a. Date of Last Report

07/29/1996

2. Principal Place of Business

21 5927 HOLLYWOOD BLVD

Suite, Apt. #, etc.

22 City & State

23 HOLLYWOOD FLORIDA

24 33021 25 U.S.A.

2a. Mailing Address

26 5927 HOLLYWOOD BLVD

Suite, Apt. #, etc.

27 City & State

28 HOLLYWOOD FLORIDA

29 33021 30 U.S.A.

4. FEI Number

65-0467091

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

ARMAS, DAVID  
5927 HOLLYWOOD BLVD  
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

PD  
ARMAS, DAVID  
5927 HOLLYWOOD BLVD  
HOLLYWOOD FL 33021

TITLE NAME ☐ DELETE

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

25 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/29/97

(954) 966-9587

CR2E034 (9/96)