

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000011400

Entity Name: ACE MORTGAGE CORP.

FILED
Mar 13, 2007
Secretary of State

Current Principal Place of Business:

6299 W. SUNRISE BLVD
SUITE 204
FORT LAUDERDALE, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

6299 W. SUNRISE BLVD
SUITE 204
FORT LAUDERDALE, FL 33313 US

New Mailing Address:

FEI Number: 65-0472908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRIS, DEXTER
1016 LONG ISLAND AVE.
FT. LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

PARRIS, DEXTER L
310 CAROLINA AVENUE
FT. LAUDERDALE, FL 33312 US

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.

SIGNATURE: DEXTER L. PARRIS

03/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PARRIS, DEXTER
Address: 6299 WEST SUNRISE BLVD SUITE 204
City-St-Zip: SUNRISE, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: PARRIS, DEXTER L
Address: 310 CAROLINA AVENUE
City-St-Zip: FT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEXTER L. PARRIS

MR.

03/13/2007

Electronic Signature of Signing Officer or Director

Date