FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000048683 (4)

ACE HARDWARE AT PINEDA, INC.

FILED May 13 1997 8:00am Secretary of State

4-30-97 407-727-3712

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Principal Plac	e of Business	Mailing Address				i i Matienet tich i firte Maste alliste dabite Matier acade vertra meine tete sone			
5970 N WICKH MELBOURNE FI		5970 N WICKHAM ROAD MELBOURNE FL 32940-2002							
						3. Date Incorporated or Qualified 06/24/1994		te of Last R 8/1996	Report
2. Principal P	Place of Business	2a. Mailing Address			4. FE! Number	Ag	plied For		
21		26			59-3263531 Not Applicable			ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		27							equired
City & Stat	le	City & State				6. Election Campaign Financing	 -		Мау Ве
Zip Zip	Country	Z ip	Cou	nln (Trust Fund Contribution			to Fees
24	25	<u> </u>	├ -¬	muy		8. This corporation has liability for in Florida Statutes	ntangible] Yes = [199.032,
24	9. Name and Address of Currer	29 Agent	30	l		10. Name and Address of New Re			
MAL	ONEY, RICHARD P	it trogistoros Agorit		81	Name	Id. Hame and Address of How the	glotolog ,	- Wein	
	ONET, RICHARD P N WICKHAM RD								
	BOURNE FL 32940		82 Street Ad			dress (P.O. Box Number is Not Acceptab	le)		
MEU	CODINE I C 02070		1	83	·				
			Ì						
				B4	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Sta	itutes the at	bove	named cor	poration submits this statement for the p	urpose of	changing it	Is registered
office or a agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change wa ations of, Section 607.0505,	as authorized Florida Stat	d by lutes	the corpora	ation's board of directors. I horeby accep	ot the app	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered ago	out and talls if another thin	IOIE: Dispelator	d fac	t supplied	ired when reinstating)	DATE		
12.	OFFICERS AN		13.	a Agei	ii signaisiti requ	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	P	DELETE	1.110	TLE				Change	Addition
NAME	MALONEY, RICHARD P		1.2 NA	AME				-	-
STREET ADDRESS	655 MARK & RANDY DRIVE		1.3 ST	REET	ADDRESS				
CITY-ST-ZIP	SATELLITE BEACH FL			1Y-S1					
TITLE	D	☐ DELETE	2.1 II					Change	Addition
NAME	MALONEY, BONNIE LEE		2.2 NA	AME					
STREET ADDRESS	655 MARK & RANDY DRIVE		2.3 ST	REET.	ADDRESS				
CITY-ST-ZIP	SATELLITE BEACH FL		2.4C	1TY - S	1 - 7/P		-		
TITLE		☐ DELETE	3.1 Til					Change	Addition
NAME	J		3.2 NA	AMF					
STREET ADDRESS			3351	REET.	ADDRESS				
CITY-ST-ZIP			34. C		1				
TITLE		DELETE	4.1 TF					Change	Addition
NAME	}		4. 2 N	3MA					
STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 01	TY - \$1	r- 2IP				
TITLE		☐ DELETE	5.1 11					Change	Addition
NAME	}		5.2 NA	ME	-				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.4 CI						
TITLE		DELETÉ	6.1 TI					Change	Addition
. NAME			6.2 NA	AME				-	
STREET ADDRESS			6,3 ST	REET.	ADDRESS				
	1		1						

14. I do hereby 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 legal effect as if made under eath; 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 13 if changed, or on an attachment with an address.