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PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000085070 (8)

ACE ELECTRIC, INC.

FILED Feb 03 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 3356 7TH STREET 3356 7TH STREET SARASOTA FL 34237 SARASOTA FL 34237 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/02/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0539601 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 🔀 Yes 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FRIEDMAN, ROBERT D 3356 7TH STREET Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34237 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 ascept the obligations of, Section 607.0505, Florida Statutes. leved agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ☐ DELETE Addition 11 TITLE Change NAME FRIEDMAN, ROBERT D 12 NAME R2E034 STREET ADDRESS 3356 7TH STREET 1.3 STREET ADDRESS SARASOTA FL 34237 CITY-ST-7IP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change ___ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE ___ Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TELL 6.1 TITLE ☐ Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 sectiver 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 aftectment with an address.

SIGNATURE:

1/1

9413624508