FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # P9500053502 (7) ACE VENTURES, INC.					IS 18145 118 SIN 6810 1811
Principal Place	of Business	Maling Address			
B61 S.W. 72ND AVENUE PLANTATION FL 33317		861 S.W. 72ND AVENUE PLANTATION FL 33317			
	_				Date of Last Report
2. Principa Pla	ce of Business	2a. Mail ng Address	> 0-()	07/12/1995 4. FEI Number	Applied For
Suite, Apt. #	-ZXII-C	26 Suite, Apt. #, etc.	vre_	65-0592922	Not Applicable
 1		27 Suite, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Ζ φ ∷1	Country	Ζφ	Country	8. This corporation has liability for intangib	
4	25 9. Name and Address of Currer	29	[30]	Florida Statutes X Yes No	
	g, Hame and Address of Currer	it negistered Agent	81 Name	10. Name and Address of New Register	red Agent
CAFRATI	DA FRIO			Same	
FAEBSTI	KA, ERIC .72ND AVENUE		82 Street Add	lress (P.O. Box Number is Not Acceptable)	
	NON FL 33317		83	·	
TENNIA	10N FE 55517		84 City		Tan Tanana
			'		FL 85 Zip Code
or registere familiar with SIGNATURE	d agent, or both, in the State of Floring, and accept the obligations of, Sectional accept the obligations of Sectional acceptance of regularies agent	da Such change was authorize ion 607.0505, Florida Statutes	ad by the corporation's boa	ration submits this statement for the purpose of ard of directors. I hereby accept the appointmen	nt as registered agent. I am
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 11(1) 5		Deltange Addition
NAME	FAENSTRA, ERIC		12 NAME	Zeerstry Eric	
STREET ADDRESS	861 S.W.72ND AVENUE		1.3 STREET ADDRESS	•	
CITY-ST-ZIP	PLANTATION FL 33317		1.4 CITY - ST - ZIP		
TITLE	D	□ DETELE	2 1 III.F		Charige Addition
NAME	FAENSTRA, CYNTHIA		5 5 NAME	eenstra Cynthia	•
STREET ADDRESS	861 S.W.72ND AVENUE		2 3 STREET ASSURES.	,	
CITY-ST-ZIP TITLE	PLANTATION FL 33317	T DELETE	2 4 CHY-ST-ZIP 3 1 THUE		Change Addition
NAME			3.2 NAME		C) Orkings C Addition
STREET ADDRESS			3.3 STREET ADDRESS	·	
CHTY-ST-ZIP			3.4 CITY - S* - ZIP		
TITLE		DELETE	4 1 TIFLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		F3 of eac	. 44 CiTY-ST ZiP		
THILE		☐ DELETE	5 1 TITLE		Change Maddition
NAME STREET ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS:		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZIP		
certify that I	the intomation indicated on this anni	ial report or supplemental annu ration or the receiver or trustee	ial report is true and accura rempowered to execute thi	for the exemption stated in Section 119.07(3)(k), ate and that my signature shall have the same k is report as required by Chapter 607, Ficrida St.	anal offact as if made under

4nthateenstra 5/23/96 761-7201