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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000935

ACE AUTO AIR CAR CARE CENTERS, INC. P95000093532 (6)

FILED Apr 24 1998 8:00am Secretary of State



Diseased Diseased Diseases	Mailing Address		# 10011E01 110 10101 01111 00111 00111 00111 60111	U ODOBA ISIDI DIIMA IIII DIIAI OBOI
Principal Place of Business	· ·			
SCOL JOHNSON STREET HOLLYWOOD FL 30021	5631-JOHNSON-STREET HOLLYWOOD FL 88821-			
MODELINOOD IE SOOE!	MODELWOOD TE WOLL		DO NOT WRITE IN TH	HIS SPACE
			3. Date Incorporated or Qualified 12/08/1995	
2. Principal Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
	ery 26 338 N 1	1. via Herr	65-0628880	Not Applicable
21 338 N DIXIE H	Suite, Apt. #, etc.	Dixie Huy	5. Certificate of Status Desired	\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the	
24 33020 25	29 33020	30	Personal Property Tax due June 30.	☐ Yes ☐ No
	Current Registered Agent		10. Name and Address of New Register	ed Agent
FROMBERG, MARC		81 Name		
5631-JOHNSON STREET		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
HOLLYWOOD FL-83021		1438		
		63		
		64 City		85 Zip Code
		Pon		-L 33025
11. Pursuant to the provisions of Sections 6	07.0502 and 607.1508, Florida Statule	a iba abawa namad sar	naration submite this statement for the surross	e of changing its registered
office or registered agent, or both, in the	e State of Florida Such change was at	uthorized by the corpora rida Statutes	ation's board of directors. I hereby accept the	appointment as registered
V 41 6 1				11/10/08
SIGNATURE Signature, typed or printed name of regis	storog agent and title if applicable (NOTE	: Registered Agent signature requ	ired when reinstaling) DA1	LE COLLEGE
	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITLE		Change Addition
NAME FROMBERG, MARC		1.2 NAME		•
STREET ADDRESS -5631-JOHNSON STREET	ET	1.3 STREET ADDRESS	1430 SW 97th TERI	e e
CITY-ST-ZIP HOLLYWOOD FL 3302	1	1.4 CITY-ST-ZIP	1430 SW 97th TERI Pembroke Pines, FI	23025
TITLE	☐ DELETE	2,1 TITLE	contra times	Change Addition
NAME	_	2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
		2. 4 CITY-ST-ZIP		
CITY-ST-ZIP	DELETE	3.1 TITLE		Change Addition
NAME	<u> </u>	3.2 NAME		
		3.3 STREET ADDRESS		
STREET ADDRESS				
CITY-ST-ZIP	☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
TITLE				
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE	U DECEM	5.1 TITLE		The principle The vertices
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		Disease Line-
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		
44 I haraby coeffly that the information sun	plied with this filing does not qualify for	ir the exemption stated in	n Section 119.07(3)(i). Florida Statutes. I furthe	ar certify that the information

Thereby details the information supplied with this hierig does not quality 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 oath; that I am an officer or director of the corporation or the receiver or trusted 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 attachment with an adortions.

about 0/2