PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000029555

1. Corporation Name

ACE UNITED PRODUCTIONS, INC.

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90020 050 ***150.00



Principal Place	e of Business	Mailing Address		+ 100 tides tid 10110 01111 00111 00111		
11706 SW 144	СТ	11706 SW 144 CT				
MIAMI FL 33186	3	MIAMI FL 33186		DO NOT WRITE IN	THIS SPACE	
				3. Date Incorporated or Qualifed	THIS OF FISE	
				04/03/1996		
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number		Applied For
21 8249	N.W.36 STREET	26 8249 N.W.	36 STMEET	65-0660032		Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.7	5 Additional
22 115	_	27 115		5. Certificate of Status Desired	Fee	Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be		
23 MIAN		28 MIAMI IT		Trust Fund Contribution	Adde	ed to Fees
— ^{Zip} つ 1./	Country	Zip 27//	Country	8. This corporation owes the current ye	_	¥6
24 3316	10 1	29 33/66 30	USA	Personal Property Tax.	Yes Agent	X)No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Regist	ereu Agent	-
ROM	IERO, CESAR		UT THAITE			
11706 SW 144 CT			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
	Al FL 33186		83			
			84 City		85 Z	ip Code
					FL	.]
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, Florida, Such change was auth	the above-named corp orized by the corporation	poration submits this statement for the purpo on's board of directors. I hereby accept the	ise of changing appointment as	its registered registered
agent. I as	m familiar min, and accept the obligation	ons of, Section 607.0505, Florida	Statutes.	on's board of directors. I hereby accept the	Lilaa	
SIGNATURE	- () grup	· Casar Pla	gistered Agent signature require	President 4	26/7/	
	Signature, typed or printed name of registered agent a				S AND DIREC	TORS IN 12
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIREC	
12.	OFFICERS AND	DIRECTORS	13.			
12. TITLE NAME	OFFICERS AND D ROMERO, CESAR	DIRECTORS	13. 1.1 TITLE 1.2 NAME			
12. TITLE NAME STREET ADDRESS	OFFICERS AND D ROMERO, CESAR 11706 SW 144 CT	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D ROMERO, CESAR	DIRECTORS	13. 1.1 TITLE 1.2 NAME			ge Addition
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6.4 CfTY-ST-ZiP CITY-ST-ZIP 14. I 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 oath; that I am an officer or director of the corporation of the receiver 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 a attachment with an address, with all other like empowered.

SIGNATURE: