

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

97 AUG -5 AM 8:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000035209 (1)

1. Corporation Name  
ACE DOOR, INC.



Principal Place of Business Mailing Address  
5702 MARY-DRIVE MACY AVE 5702 MARY-DRIVE MACY AVE  
JACKSONVILLE FL 32211 JACKSONVILLE FL 32211

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 5702 macy Ave		26 5702 macy Ave		04/19/1996			
22 Suite, Apt. #, etc. None		27 Suite, Apt. #, etc. None		4. FEI Number		Applied For	
23 City & State Jax, Fl.		28 City & State Jax, Fl.		59-3142728		Not Applicable	
24 32211		29 32211		5. Certificate of Status Desired		8.75 Additional Fee Required	
25 USA		30 USA		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30		Yes No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HALE, GARY S  
5702 MARY-DRIVE MACY AVE  
JACKSONVILLE FL 32211

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	DELETE		1.1 TITLE	Change	Addition	
NAME	HALE, GARY S			1.2 NAME			
STREET ADDRESS	5702 MARY-DRIVE MACY AVE			1.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32211			1.4 CITY-ST-ZIP			
TITLE	D	DELETE		2.1 TITLE	Change	Addition	
NAME	HALE, VICTOR			2.2 NAME			
STREET ADDRESS	5702 MARY-DRIVE MACY AVE			2.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32211			2.4 CITY-ST-ZIP			
TITLE	Soc/Treasurer	DELETE		3.1 TITLE	Change	Addition	
NAME	YOUNG, MARK			3.2 NAME			
STREET ADDRESS	5702 MARY AVE			3.3 STREET ADDRESS			
CITY-ST-ZIP	JAX FLA 32211			3.4 CITY-ST-ZIP			
TITLE		DELETE		4.1 TITLE	Change	Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		DELETE		5.1 TITLE	Change	Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
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			

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 oath; 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)

7/24/97