FILE NOW: FILING FEE 4 PROFIT FILED CORPORATION ANNUAL REPORT 99 AUG 31 PM 3: 23 P 97 00000 3857 **DOCUMENT #** 1. Corporation Name MULLER ACS, INC. Principal Place of Business Mailing Address 750 E. 847 ST. 750 E.BAY ST. VACKSONVICLE, FL 32202 DO NOT WRITE IN THIS SPACE JACKSONVILLE, FL 32202 3. Date Incorporated or Qualified 01/09/97 2. Principal Place of Business 2a. Mailing Address 4 FFI Number Applied For 59-3424338 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution 23 Added to Fees Country Zip Country 8. This corporation owes the current year Intangible 24 25 29 30 Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VLCEK, ALON B. 82 Street Address (P.O. Box Number is Not Acceptable) 750 E. BAY ST. 322000 JACKSOVULLE, FL 84 City Zip Code 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

ALAN VICER SIGNATURE ALAW VICEK Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. VILE PLESIDENT ETIL TULLER ☐ DELETE ☐ Change Addition Ξ TOTAL 1.1 TITLE 900002977769---5695 1.2 NAME CR2E034 750 6.817 ST 1.3 STREET ADDRESS 32200 ****300.00 ****300.00 VACESOWILLE, FL 1.4 CITY-ST-ZIP HILE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREE! ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP C111-ST-ZIF DELETE Change Addition THE 31 TITLE **NAME** 3.2 NAME 3.3 STREET ADDRESS STREET ADORES CID ST Ze 3.4. CITY-ST-ZIP DELETE Title 4.1 TITLE ☐ Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CP4-51-28 4.4 CITY-ST-ZIP DELETE T : F Change ☐ Addition SITTLE 5.2 NAME 404 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE mig : 6.1 TITLE Change Addition 6.2 NAME 5,555 6.3 STREET ADDRESS SHOT ACORDS 6.4 CITY-ST-ZIP 14. Thereby 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 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 a officer or director of the corporation or the receiver or trustee erget were do secure his report as required by Chapter 607, Florida Statutes; and that my name appears in flock 12 or flock 13 if changed or on an attachmor with an address, with all other like empowered. SIGNATURE:

Alan Benes VLcek

Law Offices of A.B. VLcek, P.A.

750 East Bay Street
Jacksonville, Florida 32202
Department of State
Annual Reports
P.O. Box 1500
Tall., FL 32302-1500

Inc.

Telephone: (904) 353-2840 Telefax (904) 354-2921

Re: Muller ACS, P9770000038357

Gentlemen and Ladies:

It appears that that this corporation was involuntarily dissolved on the grounds that certain documents were not submitted. As registered agent, I never received your Notice of non-submission.

Accordingly. I submit herewith the annual statements for the Corporation (utilizing my own form) along with a check for \$300.00 replacing the uncashed check for 1998 and 1999 fees.

In discussions with your staff, I understand that this will be sufficient to reinstitute the corporation.

Please do not hesitate to contact the undersigned regarding these matters.

Very truly yours,

Alan B. Vlcek

Encl: