

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000026752

Entity Name: ACE ELEVATOR CABS, INC.

FILED
Nov 04, 2004
Secretary of State

Current Principal Place of Business:

3529 NW 19TH ST
LAUDERDALE LAKES, FL 33312 US

New Principal Place of Business:

Current Mailing Address:

3529 NW 19TH ST
LAUDERDALE LAKES, FL 33312 US

New Mailing Address:

FEI Number: 65-0774011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUNDIFF, WILLIAM A
3529 NW 19 STREET
LAUDERDALE LAKES, FL 33312 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: CUNDIFF, WILLIAM A
Address: 3529 NW 19 STREET
City-St-Zip: LAUDERDALE LAKES, FL 33312

Title: VSD () Delete
Name: CUNDIFF, PAULA
Address: 3529 NW 19 STREET
City-St-Zip: LAUDERDALE LAKES, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM A. CUNDIFF

PRES

11/04/2004

Electronic Signature of Signing Officer or Director

Date