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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000057076 (6)**

ACE FLOORS AND CLEANING, INC.

3204 TRITON CIRCLE P O BOX 14975 TALLAHASSEE FL 32312 TALLAHASSEE FL 32317-4975 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/30/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 9-3461192 21 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 23 28 Trust Fund Contribution Added to Fees Zìp Country $Z_{\rm ID}$ Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name WESTWOOD, ROBERT E 3204 TRITON CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32312 83 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change **Y** Addition NAME 1.2 NAME E. WESTWOOP STREET ADDRESS 1.3 STREET ADDRESS TRITON CIR. FL. 3231 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE X Addition TITLE 2.1 TITLE DOROTHY WESTWOOD NAME 2.2 NAME 3204 TRITING UP. STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DLLONASSEE FL. 323/2 Change DELETE Addition TITLE 3 1 TITLE MICHAEL ROUSSELL 3.2 NAME 2424 LITTLE DEAL STREET ADDRESS 3.3 STREET ADDRESS TALLAHASSEE FL. 323 08 CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition TITLE 4.1 TITLE 4. 2 NAME NAME

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 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 address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

5.1 THILE

5.2 NAME

61 THLE

6.2 NAME

DELETE

DELETE

SIGNATURE: 1 1 59) and

4/20/00

SC0-384 7001

Change

Change

Addition

Addition

FILED

May 08 1998 8:00am

Secretary of State