## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000015073

FILED Apr 30, 2005 Secretary of State

| Entity Nar  | me: ACI FACII   | LITY MAINTENANCE, INC.        |  |  |  |
|---|---|-------------------------------|--|--|--|
| Current P   | rincipal Place  | of Business:                  | New Principal Place of                       | New Principal Place of Business:       |  |
| 4515 GEORGE RD<br>SUITE 320<br>TAMPA, FL 33634 US |   |                               | 3830 GUNN HIGHWAY<br>TAMPA, FL 33618 US      |  |  |
| Current M   | lailing Addres  | s:                            | New Mailing Address:                         |  |  |
| 4515 GEO<br>SUITE 320<br>TAMPA, FI                | )   | 3                             | 3830 GUNN HIGHWAY<br>TAMPA, FL 33618         | /<br>US                                |  |
| FEI Number:                                       | : 59-3514427  | FEI Number Applied For ( )    | FEI Number Not Applicable ( )                | Certificate of Status Desired ( )      |  |
| Name and  | Address of C  | urrent Registered Agent:      | Name and Address of                          | New Registered Agent:                  |  |
| TAMPA, FI   | ESTON TRAIL<br>L 33556 US                               | 8                             | purpose of changing its registered           | l office or registered agent, or both, |  |
| SIGNATUR  |   |                               |  |  |  |
| OFFICER   |   | ic Signature of Registered Ag |  | Date                                   |  |
| OFFICERS AND DIRECTORS:                           |   |                               | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | PD ()<br>MORELLI, PATI<br>16005 PRESTC<br>TAMPA, FL 335 | N TRAIL WAY                   | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | ANGEL, DAVID<br>1710 78TH AVE                           | Delete<br>N<br>BURG, FL 33702 | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                |  |

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: PATRICK MORELLI Ρ 04/30/2005