

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000032943

FILED
Feb 02, 2005
Secretary of State

Entity Name: AMERICAN CAP EXCHANGE II, INC.

Current Principal Place of Business:

7555 WEST 2ND CT
HIALEAH, FL 33014

New Principal Place of Business:

Current Mailing Address:

7555 WEST 2ND CT
HIALEAH, FL 33014

New Mailing Address:

FEI Number: 65-0590549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EL-HADDAD, AHMED
7555 WEST 2ND CT
HIALEAH, FL 33014 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: PD () Delete
Name: ELHADDAD, SHERIF MR
Address: 4174 NW 132ND ST
City-St-Zip: MIAMI, FL 33054

Title: VC () Delete
Name: ELHADDAD, AHMED MR
Address: 4174 NW 132ND ST
City-St-Zip: MIAMI, FL 33054

Title: ST () Delete
Name: ELHADDAD, MOUSTAFA MR
Address: 4174 NW 132ND ST
City-St-Zip: MIAMI, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ELHADDAD, SHERIF MR
Address: 7555 WEST 2ND COURT
City-St-Zip: HIALEAH, FL 33014

Title: VC (X) Change () Addition
Name: ELHADDAD, AHMED MR
Address: 7555 WEST 2ND COURT
City-St-Zip: HIALEAH, FL 33014

Title: ST (X) Change () Addition
Name: ELHADDAD, MOUSTAFA MR
Address: 7555 WEST 2ND COURT
City-St-Zip: HIALEAH, FL 33014

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: AHMED ELHADDAD

V

02/02/2005

Electronic Signature of Signing Officer or Director

Date