PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	i	·π->	V~~ 1				
CORPORATION	ON A	FLORIDA DEPARTMEN		0	14 FEB 18 AM 9: (31	
REINSTATEM	ENT (Secretary of States of Sta			SECRETATY OF STAT TALLAMASSEE FLORII	Έ	
	CO WI THE			•	ALLAMASSEE FLORI	ĴΑ.	
DOCUMENT 1. Corporation Name	• •	00008633					
Ace Ha	rdware	ExpOTT COG	ρ .				
			v		·		
2. Principal Office Address 3. Mailing Office Address					PEMSTATEMENT 03-04		
7325 SW 57 Kare 7325 6W57 ave							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	uite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida		
City & State	FL.	City & State			5. FEI Number Applied For		
Miami,		Miami, Count	iry.	6	955466	Not Applicable Additional Fee required	
33143	USA.	33143	154	CERTIFICATE		Certificate of Status	
		7. Name and Address	of Current Register	red Agent		 -	
Name	4055 m		<u>.</u> .				
Street Address (P.O. Box Number is Not Acceptable) 5 88 / N. W. 15 / 3 Freet							
Suite, Apt.	#, Etc. # 101						
City Miami Cakes					State Zip Code 30/9	/	
8. I, being appointed the	e registered agent of the ab-	ove named corporation, am familiar	with and accept the c	obligations of section	on 607.0505 or 617.0503, F.S.	/04_ CR2E081 (01/04)	
Signature of Registered Agent	Agy /	LEGISTERED AGENT MUST SIGN			Date	CR2E0	
9. Names and Street A	ddresses of Each Officer ar	nd/or Director (Florida nonprofit corpo	orations must list at le	east 3 directors)			
Titles Name of Officers and/or Directors			Street Address of Eac Officer and/or Directo	h or	City / State	/ Zip	
5-147	tereout, i	Jan 7325	300 3	7 ave	Hiami, FC	33/X3	
		-			000290163 704-01028-021	35 <u>0</u> ************************************	
					04-01020-021	TOTAL SERVICE SERVICE	
			 				
						·	
Siva.				-		ł	
10. I certify that I am ar	officer or director or the rec	ceiver or trustee empowered to execu	ute this application as	provided for in cha	apter 607 or 617, F.S. I further c	ertify that when filing	
this reinstatement a	application, the reason for dis-	ssolution has been eliminated, the co le names of individuals listed on this t	orporate name satisfic form do not qualify fo	r an exemption und			
on this application i	s true and accurate, and my	signature shall have the same legal	effect as il made unc	iei vani.	1 1 .	ļ.	
SIGNATURE:	Tow lill	DAN H	TCHLOCK	pes.	2/10/04 Dayti	me Phone #	



ACE.Hardware

Export, Corp.

"Meeting your Hotel and Resort Supply Needs"

7325 S.W. 57th Ave. Miami, FL 33143

Phone: (305) 667-8375 Fax: (305) 668-4584

February 11th, 2004

Florida Dept. of State
Division of Corporations
Annual Report Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327

Re: Ace Hardware Export Corp.

Dear Sir or Madam:

Upon preparing the end of the year taxes our account realized that we had not received the 2003 business report. We apologize for this, enclosed you will find the forms to reinstate the corporation and our check in the amount of \$300.00 for 2003 and 2004.

We ask that you wave any penalty charge.

Sincerely,

Ace Hardware Export Corp.

Dan Hitchcock President

DH/cr

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