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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DÓCUMENT # S30683

(4)

ACE KING OF FENCES, INC.

FILED Mar 20 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address					AI BIBIL BIBIL 1881	
9702 NORTHV TAMARAC FL	vest 67th street 33321	9702 NORTHWEST 67TH STREET TAMARAC FL 33321						
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 02/08/1991		
2, Principal Place of Business 2a. Mailing Address						4, FEI Number	Applied For	
21 2/86 NE 59 Court 26 2/86 NE 5			59	59 court		65-0243694	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			<u> </u>				75 Additional	
22 27						Fe	ee Required	
			lendale, FI.			Trust Fund Contribution	.00 May Be Ided to Fees	
Zip 24] 3336	08 25 USA	^{Zip} 33308 3	Cour	ISA		8. This corporation owes or has paid the current year		
24 333C	9. Name and Address of Current		10 <u>C</u>	1214		Personal Property Tax due June 30. Yes 10, Name and Address of New Registered Agent	∐ No	
CRAWFORD, JARRELL W. 81 Name								
0702 MODUMECT 67TH CIDECT					Jarrell W. Crawtord			
TAMARAC FL 33321				82 Street	800ce	ass (P.O. Box number is not acceptable)	rt	
			Ī	63				
			ŀ	84 City		85	Zin Code	
				".'F	-t.	Lauderdale, - 1 FL "	33308	
11. Pursuant office or agent. I	to the provisions of Sections 607.0502 agistered agent, or both, in the State of m familiar with, and accept the oblighti	and 107.1508, Florida Statutes Florida, Such change was au ons b., Section 607.0505, Flori	the ab thorized da Statu	ove-named by the corp ites.	corpo poratio	oration submits this statement for the purpose of changi on's board of directors. I hereby accept the appointmen	ing its registered at as registered	
SIGNATURE	Sprill W Can							
10	Signaphie, typud or printed name of registered agont OFFICERS AND		Registered	Agent signature	required	ADDITIONS/CHANGES TO OFFICERS AND DIREC	CTOPS IN 12	
12.	D OFFICERS AND	DELETE	1.1 TITI	F	D	Cha		
NAME	CRAWFORD, JARRELL W.		1.2 NAI		1	arrell w. Crawford		
STREET ADDRESS	9702 N.W. 67TH STREET			EET ADDRESS	31	PCNE 59 Court		
CITY-ST-ZIP	TAMARAC FL			Y-ST-ZIP	E	1 Lauderdale, F1. 3336	80	
TITLE		DELETE	2.1 TITU		-	☐ Cha		
NAME			2.2 NA	ME]		J	
STREET ADDRESS			2.3 STR	EET ADDRESS				
CITY-ST-ZIP			2. 4 Cf1	Y-\$1-ZIP				
TITLE		DELETE	3.1 TITI	.E		☐ Cha	inge 🗌 Addition	
NAME			3.2 NA	νE				
STREET ADDRESS			3.3 STR	EET ADDRESS	1			
CITY-ST-ZIP				Y - ST - ZIP	<u> </u>			
TITLE		☐ DELÉTÉ	4.1 1(1)		{	∐ Cha	ange L Addition	
NAME			4. 2 NA					
STREET ADDRESS				EET ADDRESS		:		
CITY - ST - ZIP		DELETE	4.4 CIT	Y-ST-ZIP		☐ Cha	ange Addition	
TITLE NAME		E' DECEN	5.2 NAM		}		ille [
STREET ADDRESS				ieet address				
CITY-ST-ZIP				Y-ST-ZIP		•		
TITLE		DELETE	6.1 TITU		<u> </u>	☐ Chai	nge Addition	
NAME			6.2 NA					
STREET ADDRESS			,	eet address	}			
CITY-ST-ZIP			1	Y-ST-ZIP				
- 11 E						246 a=4049 Et 11 a		

I hereby 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 tips corporation or the receiver or trustee emptywered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13/il changled, or on an attachment unit an address.

3-1-98

954-963-4925