

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Apr 15, 2005 08:00 AM  
Secretary of State**

<b>DOCUMENT # V58989</b> 1. Entity Name A C & E PROPERTY MAINTENANCE, INC.	
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Principal Place of Business 6600 NORTHWEST 27TH AVE. SUITE 211 MIAMI, FL 33147	Mailing Address 6600 NORTHWEST 27TH AVE. SUITE 211 MIAMI, FL 33147
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<b>DO NOT WRITE IN THIS SPACE</b>
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01042005 No Chg-P CR2E034 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  WILLIAMS, CHARLES N. 793 NORTHWEST 80TH ST. MIAMI, FL 33150	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT WILLIAMS, CHARLES N. 793 NW 80TH ST. MIAMI, FL 33150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS WILLIAMS, ANNETTE M. 793 NW 80TH ST MIAMI, FL
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04/15/05-80028-005 150.00

**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Charles N. Williams **CHARLES N. WILLIAMS** 4/12/05 305-693-1846  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #