

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000077141

Entity Name: ACM CARDS, INC.**Current Principal Place of Business:**450 NORTH BRAND BOULEVARD
7TH FLOOR
GLENDALE, CA 91203**Current Mailing Address:**450 NORTH BRAND BOULEVARD
7TH FLOOR
GLENDALE, CA 91203 US**FEI Number:** 48-1251814**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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

Officer/Director Detail :

Title PRESIDENT
Name CYWINSKI, JOHN C.
Address 450 NORTH BRAND BOULEVARD
 7TH FLOOR
City-State-Zip: GLENDALE CA 91203

Title DIRECTOR, CFO
Name SONG, THOMAS H.
Address 450 NORTH BRAND BOULEVARD
 7TH FLOOR
City-State-Zip: GLENDALE CA 91203

Title VP
Name GLADSTONE, SCOTT R.
Address 450 NORTH BRAND BOULEVARD
 7TH FLOOR
City-State-Zip: GLENDALE CA 91203

Title DIRECTOR, SECRETARY, VP
Name ADEL, BRYAN R.
Address 450 NORTH BRAND BOULEVARD
 7TH FLOOR
City-State-Zip: GLENDALE CA 91203

Title ASST. SECRETARY
Name WU, JOANNE
Address 450 NORTH BRAND BOULEVARD
 7TH FLOOR
City-State-Zip: GLENDALE CA 91203

Title DIRECTOR
Name JOYCE , STEPHEN P.
Address 450 NORTH BRAND BOULEVARD
 7TH FLOOR
City-State-Zip: GLENDALE CA 91203

I hereby 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 all other like empowered.

SIGNATURE: BRYAN R. ADEL**SECRETARY****01/20/2020**

Electronic Signature of Signing Officer/Director Detail

Date