2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000002781

Entity Name: ACE SURGICAL SUPPLY CO., INC.

Current Principal Place of Business:

1034 PEARL STREET BROCKTON, MA 02301

Current Mailing Address:

1034 PEARL STREET BROCKTON, MA 02301

FEI Number: 04-2428967 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION 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: KEVIN CURTIN 04/25/2017

Electronic Signature of Registered Agent

Date

FILED Apr 25, 2017

Secretary of State

CC4955853439

Date

Officer/Director Detail:

Title DIRECTOR Title PRESIDENT, DIRECTOR CARCHIDI, J. EDWARD CARCHIDI, CRAIG Name Name 1034 PEARL STREET Address 1034 PEARL STREET Address City-State-Zip: **BROCKTON MA 02301 BROCKTON MA 02301** City-State-Zip:

Title VP, EXECUTIVE SECRETARY Title **OTHER**

Name ETTINGER, MICHAEL S CARCHIDI, CHRISTOPHER Name Address 135 DURYEA ROAD Address 1034 PEARL STREET MELVILLE NY 11747 City-State-Zip: City-State-Zip: **BROCKTON MA 02301**

Title DIRECTOR Title DIRECTOR, VP

Name BERGMAN, STANLEY M MLOTEK. MARK E Name Address 135 DURYEA ROAD Address 135 DURYEA ROAD City-State-Zip: MELVILLE NY 11747 City-State-Zip: MELVILLE NY 11747

Title TREASURER, VP PALADINO, STEVEN Name 135 DURYEA ROAD Address

Electronic Signature of Signing Officer/Director Detail

MELVILLE NY 11747

City-State-Zip:

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.

04/25/2017 SIGNATURE: CRAIG CARCHIDI **PRESIDENT**