2019 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 US

FEI Number: 04-2428967 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

FILED Jan 17, 2019

Secretary of State

0220476005CC

Officer/Director Detail:

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

Title MARKETING DIRECTOR Title SECRETARY, VP

Name CARCHIDI, CHRISTOPHER Name ETTINGER, MICHAEL S. ESQ.

Address 1034 PEARL STREET Address 135 DURYEA ROAD

City-State-Zip: BROCKTON MA 02301 City-State-Zip: MELVILLE NY 11747

Title DIRECTOR, EXECUTIVE VP Title DIRECTOR

NameMLOTEK, MARK E.NameBERGMAN, STANLEY M.Address135 DURYEA ROADAddress135 DURYEA ROADCity-State-Zip:MELVILLE NY 11747City-State-Zip:MELVILLE NY 11747

Title DIRECTOR Title **EXECTUIVE VP** SHOFF, LONNIE Name PALADINO, STEVEN Name 135 DURYEA RD Address 135 DURYEA ROAD Address City-State-Zip: MELVILLE NY 11747 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.

SIGNATURE: MICHAEL S. ETTINGER ESQ.

SECRETARY

01/17/2019

Electronic Signature of Signing Officer/Director Detail

Date