2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# L08000112324

Entity Name: ACL INTERNATIONAL EDUCATION CENTER, LLC

Current Principal Place of Business:

#307-08, ODEON PLAZA-II, 3RD FLOOR
PLOT NO.13, SECTOR-10 DEARKA
NEW DELHI-110075, INDIA,

New Principal Place of Business:

#307-08, ODEON PLAZA-II, 3RD FLOOR
PLOT NO.13, SECTOR-10 DWARKA
NEW DELHI-110075, INDIA, XX XXXXXXXXX OC

Current Mailing Address:

#307-08, ODEON PLAZA-II, 3RD FLOOR
PLOT NO.13, SECTOR-10 DEARKA
NEW DELHI-110075, INDIA,

New Mailing Address:

ACL, 2ND FLOOR, GOEL PALACE
FAIZABAD ROAD
LUCKNOW 226016, UP, INDIA, XX XXXXXXXXX OC

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

A1A RERGISTERED AGENT, INC.
5647 110TH AVE. NORTH
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	MALHOTRA, MANISH	
Address:	SFS CATEGORY II, FLAT NO. 406	
City-St-Zip:	NEW DELHI - 110075, INDIA,	
Title:	MGR	( ) Delete
Name:	SHARMA, PRAVIN	
Address:	#A-13, CLASSIC APPARTMETNS, AMIO CGHS	
City-St-Zip:	NEW DELHI-110075, INDIA,	
Title:	MGR	( ) Delete
Name:	TYAGI, GAYATRI	
Address:	2/179 VIRAT KHAND, GOMTI NAGAR	
City-St-Zip:	LUCKNOW UTTTAR PRADESH,	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PRAVIN SHARMA MGR 04/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date