

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000044742

Entity Name: ACL GLOBAL, INC.

FILED
Feb 21, 2005
Secretary of State

Current Principal Place of Business:

13380 PONDEROSA WAY
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

13380 PONDEROSA WAY
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-1004935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, RONALD S CPA PA
1342 COLONIAL BLVD., STE. 22
FORT MYERS, FL 33907 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEVENE, ANTHONY
Address: 13380 PONDEROSA WAY
City-St-Zip: FORT MYERS, FL 33907

Title: VPD () Delete
Name: LEVENE, CHERYL
Address: 13380 PONDEROSA WAY
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: SIMON, RONALD S
Address: 1402 BEECHWOOD TRAIL
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANTHONY S. LEVENE

PD

02/21/2005

Electronic Signature of Signing Officer or Director

Date