## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000008999

Entity Name: ACFOUR CORP.

Title:

Name:

Address:

City-St-Zip:

FILED Jan 15, 2009 Secretary of State

Littly Nai	ile. ACITO	OR CORF.								
Current Principal Place of Business:					New Principal Place of Business:					
3515 N.W. MIAMI, FL	60TH STR 3+3142	EET			3515 N.W. MIAMI, FL		REET			
Current Mailing Address:					New Mailing Address:					
3515 N.W. 60TH STREET MIAMI, FL 3+3142					3515 N.W. 60TH STREET MIAMI, FL 33142					
FEI Number: 41-2029146 FEI Number Applied For ( )				FEI Num	FEI Number Not Applicable ( )			Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:					
	16TH STR	EET L 333114132 US								
	named ent of Florida	ity submits this stat	ement for the pu	ırpose of	changing if	ts registere	ed office or re	egistered ag	ent, or both,	
SIGNATUR	RE:									
Electronic Signature of Registered Agent					Date					
Election Car	npaign Finar	cing Trust Fund Cont	ribution ( ).							
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	D CHEN, CON 3515 N.W. MIAMI, FL	60TH STREET			Title: Name: Address: City-St-Zip:	D CHEN, COI 3515 N.W. MIAMI, FL	60TH STREET	•		
Title: Name: Address: City-St-Zip:	D CHEN, HEL 3515 N.W. MIAMI, FL	60TH STREET			Title: Name: Address: City-St-Zip:	D CHEN, HEL 3515 N.W. MIAMI, FL	60TH STREET			
Title: Name: Address: City-St-Zip:	D CHEN, JAS 3515 N.W. MIAMI, FL	60TH STREET			Title: Name: Address: City-St-Zip:	D CHEN, JAS 3515 N.W. MIAMI, FL	60TH STREET			

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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CONRODD A. CHEN D 01/15/2009

() Delete

CHEN, MELISSA

MIAMI, FL 3+3142

3515 N.W. 60TH STREET

(X) Change ( ) Addition

CHEN, MELISSA

MIAMI, FL 33142

3515 N.W. 60TH STREET