

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000028340

FILED
May 27, 2009
Secretary of State**Entity Name:** ACCOUNTING RESOURCE GROUP, INC.**Current Principal Place of Business:**6099 STIRLING ROAD SUITE 101
DAVIE, FL 33314**New Principal Place of Business:****Current Mailing Address:**6099 STIRLING ROAD SUITE 101
DAVIE, FL 33314**New Mailing Address:****FEI Number:** 03-0407002**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**VEGA, ELIZABETH
6099 STIRLING ROAD SUITE 101
DAVIE, FL 33314 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VEGA, ELIZABETH
Address: 6390 SW 195 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33332

Title: VD (X) Delete
Name: VEGA, NELSON J
Address: 6390 SW 195 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VEGA, ELIZABETH
Address: 6099 STIRLING ROAD SUITE 101
City-St-Zip: DAVIE, FL 333314

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 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: ELIZABETH VEGA

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05/27/2009

Electronic Signature of Signing Officer or Director

Date