

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132296

Entity Name: ACEL GROUP, INC.

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

1858 NW 139 TERRACE  
PEMBROKE PINES, FL 33028

## New Principal Place of Business:

## Current Mailing Address:

1858 NW 139 TERRACE  
PEMBROKE PINES, FL 33028

## New Mailing Address:

FEI Number: 20-1661381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PLUVIOSE, LEZINSKA  
1864 NW 140 TERRACE  
PEMBROKE PINES, FL 33028 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ARIOL, ETIENNE  
Address: 1858 NW 139 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP ( ) Delete  
Name: MONESTIME, CAMILLE  
Address: 146-26 230 STREET  
City-St-Zip: ROSEDALE, NY 11413

Title: D ( ) Delete  
Name: PLUVIOSE, LEZINSKA  
Address: 1864 NW 140 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete  
Name: AUBOURG, ARIANE  
Address: 17 MOLDEN AVE  
City-St-Zip: LYNBROOK, NY 11563

## 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:

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: ETIENNE ARIOL

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date