

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000096263

FILED
May 30, 2009
Secretary of State

Entity Name: REGEL'S II, ACCESSORIES INC.

Current Principal Place of Business:

3418 EST NORTH ST
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

3418 EST NORTH ST
TAMPA, FL 33610

New Mailing Address:

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

Name and Address of Current Registered Agent:

VICKERS, LORSHAWN
3418 EST NORTH ST
TAMPA, FL 33610 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: CEO () Delete
Name: VICKERS, LORSHAWN
Address: 3418 EST NORTH ST
City-St-Zip: TAMPA, FL 33610

Title: S () Delete
Name: COBB, APRIL
Address: 9624 N. HARTTS DR
City-St-Zip: TAMPA, FL 33417

Title: T () Delete
Name: BYTHEWOOD, CECELIA
Address: 7409 SAVANAH LANE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: WOODS, HELEN
Address: 1320 BLUFFVIEW DR
City-St-Zip: DESOTA, TX 75115

Title: P () Delete
Name: AYERS, SHARON
Address: 770 WINDBROOK CIRCLE
City-St-Zip: NEW PORT NEWS, VA 23602

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:

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: LORSHAWN VICKERS

CEO

05/30/2009

Electronic Signature of Signing Officer or Director

Date