

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000091745

FILED
Sep 15, 2008
Secretary of State**Entity Name:** ACCOUNTING SOLUTION GROUP INC.**Current Principal Place of Business:**900 WEST 49 ST.
SUITE 505
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**900 WEST 49 ST.
SUITE 505
HIALEAH, FL 33012**New Mailing Address:****FEI Number:** 65-0791352**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**VAZQUEZ, ERICK
900 WEST 49 ST.
SUITE 505
HIALEAH, FL 33012 US**Name and Address of New Registered Agent:**VAZQUEZ, ANA PD
900 WEST 49 ST.
SUITE 505
HIALEAH, FL 33012 US

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: ANA VAZQUEZ

09/15/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VAZQUEZ, ERICK
Address: 900 W 49 ST SUITE 505
City-St-Zip: HIALEAH, FL 33012

Title: VP (X) Delete
Name: VAZQUEZ, ANA L
Address: 900 W 49 ST SUITE 505
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VAZQUEZ, ANA
Address: 900 W 49 ST SUITE 505
City-St-Zip: HIALEAH, FL 33012

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: ANA VAZQUEZ

PD

09/15/2008

Electronic Signature of Signing Officer or Director

Date