

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000050112

Entity Name: ANGELIC ACCENTS, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

801 S. UNIVERSITY DR.
C124
PLANTATION, FL 33324

New Principal Place of Business:

250 S. UNIVERSITY DR.
PLANTATION, FL 33324

Current Mailing Address:

801 S. UNIVERSITY DR.
C124
PLANTATION, FL 33324

New Mailing Address:

250 S. UNIVERSITY DR.
PLANTATION, FL 33324

FEI Number: 65-0840392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCALPIN, SOPHIA K
11360 N.W. 5 STREET
PLANTATION, FL 33325 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCALPIN, SOPHIA K
Address: 11360 N.W. 5 STREET
City-St-Zip: PLANTATION, FL 33325

Title: VPD () Delete
Name: MCALPIN, JAMES G
Address: 11360 NW 5TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SOPHIA K. MCALPIN

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date