


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 21, 2008 08:00 AM
Secretary of State

DOCUMENT # 550518
 1. Entity Name
ACCOUNTING SYSTEMS & TAXES INC.



| | |
|---|---|
| Principal Place of Business 12340 N.W. 30TH ST. SUNRISE, FL 33323 | Mailing Address 12340 N.W. 30TH ST. SUNRISE, FL 33323 |
|---|---|

DO NOT WRITE IN THIS SPACE



01122008 No Chg-P CR2E034 (11/05)

| | |
|---|---------------------------------------|
| 4. FEI Number 59-1778270 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

BETANCOURT, CARMEN E.
 12340 NW 30 ST
 SUNRISE, FL 33323

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000834070
 02/20/08 00037 020 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BETANCOURT, ORESTE D. 12340 N.W. 30TH ST. SUNRISE, FL 33323 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SV BETANCOURT, CARMEN E 12340 N.W. 30TH ST SUNRISE, FL 33323 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSTR BETANCOURT, FRANCOIS 12340 NW 30TH ST SUNRISE, FL 33323 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carmen E. Betancourt, Sec* **02/16/08 (954) 792-8317**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #