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Jan 14 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H89904 (7)  
1. Corporation Name  
NATIONAL INCOME TAX, ACCOUNTING & INSURANCE SERVICES, INC.



Principal Place of Business: % THOMAS MICHAEL GARGIULO JR. 12564 93RD WAY, NORTH LARGO FL 34643  
Mailing Address: % THOMAS MICHAEL GARGIULO JR. 12564 93RD WAY, NORTH LARGO FL 33773-2535

3. Date Incorporated or Qualified: 12/16/1985  
3a. Date of Last Report: 02/05/1996  
4. FEI Number: 59-2614478  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes

2. Principal Place of Business: 21 Suite, Apt. #, etc.; 22 City & State; 23 Zip: 33773, Country; 24  
2a. Mailing Address: 26 Suite, Apt. #, etc.; 27 City & State; 28 Zip: 33773, Country; 29

9. Name and Address of Current Registered Agent  
GARGIULO JR., THOMAS MICHAEL  
12564 93RD WAY, NORTH  
LARGO FL 34643  
33773

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature typed or printed name of registered agent or director if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	GARGIULO JR., THOMAS M.	
STREET ADDRESS	12564 93RD WAY, NORTH	
CITY - ST - ZIP	LARGO FL	
TITLE	VP	DELETE
NAME	GARGIULO, KAREN LEE	
STREET ADDRESS	12564 93RD WAY, NORTH	
CITY - ST - ZIP	LARGO FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Karen L. Gargiulo KAREN L GARGIULO VP 1/6/97 8135464762  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)