FILED

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90045 031 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J89215

1. Corporation Name

SOUTHERN TAX SERVICES, INC.

Principal Place of Business Mailing Address					
2210 HOLLYWO	P O BOX 2690				
HOLLYWOOD F		HOLLYWOOD FL 33022			DO NOT WEST IN THE COLOS
US		US	U\$		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 08/25/1987
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21	26			59-284 1956 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
27		27			5. Certificate of Status Desired Fee Required
City & State	•	City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28			Trust Fund Contribution Added to Fees	
Zip Country Zip			Country		8. This corporation owes the current year Intangible
24	25	29 36	ᆝ		Personal Property Tax. Yes No
	9. Name and Address of Currer	t Registered Agent	8	Nama	10. Name and Address of New Registered Agent
CAT	ranach, Christine K.		°	Name	hristine K. Cattanach
	HOLLYWOOD BLVD.		8:	2 Street	et Address (P.O. Box Number is Not Acceptable)
	LYWOOD FL 33020		\		210 Hollywood Diva
HULLTWOOD FL 33020			8:	3	, ~
			8	4 City	85 Zip Code
				1 17	Hollywood FL 85 Zip Code 33020
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 regist 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 a	m amiliar with, and accept the obliga	tions of Section 607.0505, Florid	a Statute	s.	
SIGNATURE	Austre 14	Marsh			
·	Signature, typed or printed name of registered age		•	ent signature n	re required when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		ND DIRECTORS	13. 1.1 TITLE		Change Addition
TITLE	PD CATTANACH CUDICTINE K		1.2 NAME		
NAME	CATTANACH, CHRISTINE K.			ET ADDRESS	
STREET ADDRESS	2210 HOLLYWOOD BLVD HOLLYWOOD FL				```
CITY-ST-ZIP	HOLLYWOOD FL		14 CITY- 2.1 TITLE		Hollywood The 3020
TITLE	•	C OCCCIO	2.2 NAME		
NAME					
STREET ADDRESS				ET ADDRESS	»
CITY-ST-ZIP		☐ DELETE	2.4 CfTY 3.1 TITLE		Change Addition
TITLE		<u> </u>	3.2 NAME		
NAME			•	ET ADDRESS	ee l
STREET ADDRESS			3.4. CITY		
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		Change Addition
			4. 2 NAM		
NAME			1	ET ADDRESS	222
STREET ADDRESS			4.4 CITY-		~ [
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		1
STREET ADDRESS			5 3 STRE	ET ADDRESS	ss
			5.4 CITY-		1
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STRE	ET ADDRESS	ss

6.4 CITY-ST-ZIP

14. I 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 indicated 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 conformation 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP