

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000019134

Entity Name: MITCH TAX SERVICES, INC.

FILED  
Oct 17, 2007  
Secretary of State

## Current Principal Place of Business:

102 N.W. 5TH AVENUE  
DELRAY BEACH, FL 33444 US

## New Principal Place of Business:

2201 NE 2ND AVE STE B  
DELRAY BEACH, FL 33444 US

## Current Mailing Address:

102 N.W. 5TH AVENUE  
DELRAY BEACH, FL 33444 US

## New Mailing Address:

2201 NE 2ND AVE STE B  
DELRAY BEACH, FL 33444 US

FEI Number: 20-4251452

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELIVRANCE, MICHLIN  
102 N.W. 5TH AVENUE  
DELRAY BEACH, FL 33444 US

## Name and Address of New Registered Agent:

DELIVRANCE, MICHLIN  
2201 NE 2ND AVE STE B  
DELRAY BEACH, FL 33444 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: MICHLIN DELIVRANCE

10/17/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DELIVRANCE, MICHLIN  
Address: 102 N.W. 5TH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VP ( ) Delete  
Name: JEANTY, EVA  
Address: 102 N.W. 5TH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DELIVRANCE, MICHLIN  
Address: 2201 NE 2ND AVE ST B  
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: SYLVAIN, MERVEILLE  
Address: 2201 NE 2ND AVE ST B  
City-St-Zip: DELRAY BEACH, FL 33444

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: MICHLIN DELIVRANCE

VP

10/17/2007

Electronic Signature of Signing Officer or Director

Date