

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H89904

**Entity Name:** NATIONAL INCOME TAX, ACCOUNTING & INSURANCE SERVICES, INC.

**FILED**  
**Mar 02, 2016**  
**Secretary of State**  
**CC0348394696**

**Current Principal Place of Business:**

2952 66 STREET N  
SAINT PETERSBURG, FL 33710

**Current Mailing Address:**

2952 66 STREET N  
SAINT PETERSBURG, FL 33710 US

**FEI Number: 59-2614478**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GARGIULO JR, THOMAS M  
12564 93RD WAY, NORTH  
LARGO, FL 33773 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name GARGIULO, THOMAS M  
Address 12564 93RD WAY, NORTH  
City-State-Zip: LARGO FL 33773

Title VP  
Name GARGIULO, KAREN L  
Address 12564 93RD WAY, NORTH  
City-State-Zip: LARGO FL 33773

Title OFFICER  
Name GARGIULO, DAVID M  
Address 175 2ND ST S UNIT 805  
City-State-Zip: ST PETERSBURG FL 33701

*I hereby 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 all other like empowered.*

SIGNATURE: KAREN GARGIULO

VP

03/02/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date