

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000023164

**Entity Name:** TAX HOUSES AND ACCOUNTING SERVICES, INC

**Current Principal Place of Business:**

4249 N STATE RD 7  
LAUDERDALE LAKES, FL 33319

**Current Mailing Address:**

1921 NW 49TH AVENUE  
COCONUT CREEK, FL 33063

**FEI Number: 46-1487442**

**Certificate of Status Desired: No**

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

LOUIMA, GUARY  
1921 NW 49TH AVENUE  
COCONUT CREEK, FL 33063 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                      | Title           | V                     |
| Name            | LOUIMA, GUARY          | Name            | TELFORT, GUY          |
| Address         | 1921 NW 49TH AVENUE    | Address         | 10900 NW 24 ST        |
| City-State-Zip: | COCONUT CREEK FL 33063 | City-State-Zip: | CORAL SPRING FL 33065 |

*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: GUY TELFORT**

**VP**

**04/15/2016**

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

\_\_\_\_\_  
Date