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.

DVP

SIGNATURE: JOSE A TORRES

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024083

Entity Name: JN ACCOUNTING AND TAX SERVICE INC.

Current Principal Place of Business:

10305 N.W. 41ST STREET SUITE 116 DORAL, FL 33178

Current Mailing Address:

10305 N.W. 41ST STREET SUITE 116 DORAL, FL 33178 US

FEI Number: 65-0903044

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

TORRES, NEMARI 10305 N.W. 41ST STREET SUITE 116 DORAL, FL 33178 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:

Officer/Director Detail :

Officer/Director Detail.			
Title	DPS	Title	DVP
Name	TORRES, NEMARI	Name	TORRES, JOSE A
Address	10305 N.W. 41ST STREET, SUITE 116	Address	10305 N.W. 41ST STREET, SUITE 116
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

FILED Jan 05, 2016 Secretary of State CC3641575792

Date

Certificate of Status Desired: Yes

Date

01/05/2016