# above, or on an attachment with all other like empowered.

#### SIGNATURE: SUSAN KELLEY

Electronic Signature of Signing Officer/Director Detail

#### **Current Principal Place of Business:** 29035 SW 152 AVE HOMESTEAD, FL 33033

## **Current Mailing Address:**

DOCUMENT# S74079

29035 SW 152 AVE HOMESTEAD, FL 33033

### FEI Number: 65-0279066

### Name and Address of Current Registered Agent:

KELLEY, SUSAN 29035 SW 152 AVE HOMESTEAD, FL 33033 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

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: TAXSERVICES OF SOUTH FLORIDA INC.

#### **Officer/Director Detail :**

Title	D	Title	ST
Name	KELLEY, JAMES	Name	KELLEY, SUSAN
Address	29035 SW 152 AVE	Address	29035 SW 152 AVE
City-State-Zip:	HOMESTEAD FL 33033	City-State-Zip:	HOMESTEAD FL 33033

# 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

ST

02/20/2017 Date

## FILED Feb 20, 2017 Secretary of State CC1819297822

Certificate of Status Desired: No

Date