


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2008 08:00 AM
Secretary of State

DOCUMENT # 550518	
1. Entity Name ACCOUNTING SYSTEMS & TAXES INC.	

Principal Place of Business 12340 N.W. 30TH ST. SUNRISE, FL 33323	Mailing Address 12340 N.W. 30TH ST. SUNRISE, FL 33323
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DO NOT WRITE IN THIS SPACE



01122008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1778270	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BETANCOURT, CARMEN E.
12340 NW 30 ST
SUNRISE, FL 33323**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000834070 02/20/08 00037 020 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BETANCOURT, ORESTE D. 12340 N.W. 30TH ST. SUNRISE, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV BETANCOURT, CARMEN E 12340 N.W. 30TH ST SUNRISE, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTR BETANCOURT, FRANCOIS 12340 NW 30TH ST SUNRISE, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carmen E. Betancourt, Sec* **02/16/08 (954) 792-8317**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #