

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90185 007 ***150.00

DOCUMENT # F04000005554

1. Entity Name
INTERNATIONAL TAX ADVISORS, INC.



Principal Place of Business
**1250 BARCLAY BOULEVARD
BUFFALO GROVE, IL 60089**

Mailing Address
**1250 BARCLAY BOULEVARD
BUFFALO GROVE, IL 60089**

40085394



DO NOT WRITE IN THIS SPACE

04122007 No Chg-P CR2E034 (11/05)

4. FEI Number
75-3067246

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|----------------|-------------------------|
| TITLE | DP |
| NAME | BURGESS, JOHN |
| STREET ADDRESS | 1250 BARCLAY BOULEVARD |
| CITY-ST-ZIP | BUFFALO GROVE, IL 60089 |
| TITLE | DST |
| NAME | STEINBERG, GREGG |
| STREET ADDRESS | 1250 BARCLAY BOULEVARD |
| CITY-ST-ZIP | BUFFALO GROVE, IL 60089 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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IN THIS SPACE**

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 fee empowered.

Gregg Steinberg

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/07

(847) 808-5590

Daytime Phone #