

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003141

FILED
Mar 31, 2008
Secretary of State

Entity Name: OPERATING TAX SPECIALIST, INC.

Current Principal Place of Business:

1601 N. PALM AVENUE
SUITE 205
PEMBROKE PINES, FL 33026 US

New Principal Place of Business:

Current Mailing Address:

1040-C CAMBRIDGE SQUARE
ALPHARETTA, GA 30004

New Mailing Address:

FEI Number: 58-1922158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

URITIS, AL
1601 N. PALM AVE., SUITE 205
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: URITIS, AL
Address: 8721 N.W. 19 ST.
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: VDT () Delete
Name: MERRELL, CHANDLER
Address: 1945 SETTINDOWN DRIVE
City-St-Zip: ROSWELL, GA 30075 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VDT (X) Change () Addition
Name: MERRELL, CHANDLER
Address: 530 SPRING GATE LANE
City-St-Zip: ALPHARETTA, GA 30004 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHANDLER MERRELL

VDT

03/31/2008

Electronic Signature of Signing Officer or Director

Date