

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000003141

**FILED**  
**Apr 25, 2012**  
**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 CAMBRIDGE SQUARE  
SUITE C  
ALPHARETTA, GA 30009 US

**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

**OFFICERS AND DIRECTORS:**

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

Title: VDT  
Name: MERRELL, CHANDLER  
Address: 1050 REECE ROAD  
City-St-Zip: ALPHARETTA, GA 30004 US

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.

SIGNATURE: CHANDLER MERRELL

VDT

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date