2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 06, 2009
Secretary of State

DOCUMENT# H89177

Entity Name: ASSOCIATES ACCOUNTING & TAX SERVICES, INC.

Current Principal Place of Business:

1900 W COMMERCIAL BLVD
STE. 20
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

2855 N UNIVERSITY DR #600
STE 600
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

P.O. BOX 590910
FT. LAUDERDALE, FL 333590910 US

New Mailing Address:

2855 N UNIVERSITY DR #600
STE 600
CORAL SPRINGS, FL 33065 US

FEI Number: 59-2612101 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FOREST, CATHERINE PD
1900 W COMMERCIAL BLVD
STE. 20
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

FOREST, CATHERINE PD
2855 N UNIVERSITY DR
STE 600
CORAL SPRINGS, FL 33065 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: CATHERINE FOREST 10/06/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FOREST, CATHERINE
Address: 1900 W COMMERCIAL BLVD, STE. 20
City-St-Zip: FORT LAUDERDALE, FL 33309 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: FOREST, CATHERINE
Address: 2855 N UNIVERSITY DR SUITE 600
City-St-Zip: CORAL SPRINGS, FL 33065 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: CATHERINE FOREST PRES 10/06/2009
Electronic Signature of Signing Officer or Director Date