FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J12193** **(5)**

1. Corporation Name
EXPRESS ACCOUNTING AND TAX SERVICE, INC.

Principal Place of Business
% LARRY J. TODD
11710 N. 17TH ST
TAMPA FL 33612
US

Mailing Address
% LARRY J. TODD
11710 NORTH 17TH STREET
TAMPA FL 33612
US

3. Date Incorporated or Qualified: 05/01/1986
3a. Date of Last Report: 01/25/1995

4. FEI Number: 59-2703072 — Applied For / Not Applicable

5. Certificate of Status Desired: [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: [ ] **$5.00** May Be Added to Fees

8. Has corporation had liability for intangible tax under s. 199.032, Florida Statutes? [ ] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
COOK, VALERIE.
11710 NORTH 17TH STREET
TAMPA FL 33612

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section [illegible] Florida Statutes, [illegible] the statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. [illegible] I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section [illegible] Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
PD	TODD, LARRY J	11710 N 17 ST	TAMPA FL	[ ]
STD	FEATHERS, DEBORAH	11710 N 17 ST	TAMPA FL	[ ]
				[ ]
				[ ]
				[ ]
				[ ]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition

14. I hereby 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 12 or Block 13 of this report or in any attachment with the proper title.

SIGNATURE: Larry J. Todd LARRY J. TODD 3-27-96 813-971 2800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

CR2E034 (12/95)