2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 21, 2004 08:00 AM **DOCUMENT # J89215 Secretary of State** 1. Entity Name SOUTHERN TAX SERVICES, INC. Principal Place of Business Mailing Address 2210 HOLLYWOOD BLVD P 0 BOX 2690 HOLLYWOOD, FL 33020 US HOLLYWOOD, FL 33022 01152004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2841956 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CATTANACH, CHRISTINE K. DO NOT WRITE 2210 HOLLYWOOD BLVD HOLLYWOOD, FL 33020 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. Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000060437 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE CATTANACH, CHRISTINE K. NAME STREET ADDRESS 2210 HOLLYWOOD BLVD CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachypint with an address, with all other the empowered.

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/04 954.925.3141

FILED