

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED AND FILED
95 MAY -1 AM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J97898 (7)

1. Corporation Name

ACCOUNTING, CONSULTING, TAX SERVICES, INC.

Principal Place of Business

**3270 SW 17TH ST
MIAMI FL 33145**

Mailing Address

**3270 SW 17TH ST
MIAMI FL 33145**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Renewed: **10/19/1987**
3a. Date of Last Report: **05/01/1994**

2. Principal Change of Business

21

2b. Mailing Address

26

4. FEI Number
65-0063677

Applied Fee
Not Applicable

State: April 1995

22

State: April 1995

27

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State

23

City & State

28

6. Election Campaign (Presidential) Trust Fund Contribution **\$5.00 May Be Added to Fees**

Country

24

Country

29

Country

30

8. This corporation has liability for intangible tax under S. 199.033, Florida Statutes. Yes No

9. Name and Address of Current Registered Agent

**CENFUEGOS, ARMANDO R.
3270 SW 17 STREET
MIAMI FL 33145**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Applicable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 600.01 and 601.14(1), Florida Statutes, the above named corporation submits this statement for the purpose of designating its registered office or registered agent in both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 600.01 and 601.14(1), Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title) _____ Title _____

12. OFFICERS AND DIRECTORS

12a	D
NAME	CENFUEGOS, ARMANDO R
STREET ADDRESS	3270 S.W. 17TH STREET
CITY & STATE	MIAMI FL
12b	
NAME	
STREET ADDRESS	
CITY & STATE	
12c	
NAME	
STREET ADDRESS	
CITY & STATE	
12d	
NAME	
STREET ADDRESS	
CITY & STATE	
12e	
NAME	
STREET ADDRESS	
CITY & STATE	

13. ADDITIONAL CHANGES TO OFFICER, DIRECTOR, REGISTERED OFFICE

13a	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13b	
13c	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13d	
13e	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13f	
13g	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13h	
13i	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13j	
13k	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13l	
13m	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13n	
13o	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13p	
13q	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13r	
13s	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13t	
13u	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13v	
13w	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13x	
13y	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13z	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 600.01(1)(b), Florida Statutes. I further certify that the information filed on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the treasurer or holder of a power of attorney appointment to execute this report as required by Chapter 1907, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an affidavit with an address.

SIGNATURE:

ARMANDO R. CENFUEGOS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/95
DATE