2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 17, 2006 08:00 AM Secretary of State

ANNUAL REPURI			Convetare of C4-4-
DOCUMENT # K34671 1. Entity Name A & T ACCOUNTING AND TAX S	SERVICE, INC.		Secretary of State
			{
Principal Place of Business	Mailing Address		
7098 BONITA DRIVE	7098 BONITA DRIVE		}
MIAMI BEACH, FL 33141	MIAMI BEACH, FL 33141		
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		**	} - I MATHAILL AND LICLE BUTCH COMMUNICATION (COMMUNICATION STATE NO. 1888) BURN) PURIT PROFITABLE & LANG.
			01052006 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		- 01002000 110 Oligh Oligh	
		ICE	4. FEI Number Applied For
}			65-0071161 Not Applicable
}			5. Certificate of Status Desired \$8.75 Additional
		·	Fee Required
6. Name and Address of Cur	rent Registered Agent	- -{	
ANTHONY L TRULLENQUE	- · · · ·	1	
7098 BONITA DR			DO NOT WRITE
MIAMI BCH, FL 33141		}	B1 7100 00400
{		-	IN THIS SPACE
		{	
(
8. The above named entity submits this statement	ent for the purpose of changing its regist	ered office or register	red 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 INOTE Registr	ered Agent signsture required	i when reinstaling) DATE -
	** :		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$5	9. Election Campatgn Fin Trust Fund Contribution		.00 May Be ed to Fees
10. ÖFFICERS	AND DIRECTORS		and the same of th
TITLE PSD		1	
NAME ANTHONY L TRULLENQUE		1	•
STREET ADDRESS 7098 BONITA DR		1	
CITY-ST-ZIP MIAMI BCH, FL 33141			1,00000388344
TITLE			01/20/06-80001-004 158.75
NAME			
STREET ACORESS		3	
CITY-ST-ZIP		1	
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NAME		1	
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TITLE AND	- •	•	•
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TOLE		7	
NAME		1	
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CITY-SI-ZIP			
12. I hereby certify that the information supplied	with this filling does not qualify for the e	xemptions contained	I in Chapter 119, Florida Statutes, I further certify that the information same legal effect as if made under oath, that I am an officer or director I, Florida Statutes; and that my name appears in Block 10 or Block 11 if
incluated on this report of supplemental rep of the corporation of the receiver of testee	ол is the and accurate and that my sign	nature shall have the juited by Chanter 801	same legal effect as it made under oath, that I am an officer or director I. Florida Statutes: and that my name annears in Block 10 or Block 11 if
changed, or on an attachment with an add	ess, with all other like empowered.		The state of the s

AME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

1/17/06

(305) 868-5365

Daylime Phone #