2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K42316

Entity Name: INCOME TAX CENTER, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	T STREET DOD, FL 3302	4			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	T STREET OOD, FL 3302	4			
FEI Number	: 65-0086720	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
The above	TST. DOD, FL 3302		ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUI					
SIGNATO		nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (LYE, MICHELL 8600 N.W. 4TH PEMBEOKE PI	IST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD (LYE, GEORGE 7096 TAFT ST HOLLYWOOD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (LYE, LOLA Q., 7096 TAFT ST HOLLYWOOD) Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: LOLA LYE P 04/30/2008