

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K48106

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** KINNER ACCOUNTING & TAX, INC.

**Current Principal Place of Business:**

5411 ORTEGA BLVD.  
SUITE 5  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

5513 ROOSEVELT BLVD.  
SUITE 248  
JACKSONVILLE, FL 32244

**Current Mailing Address:**

5411 ORTEGA BLVD.  
SUITE 5  
JACKSONVILLE, FL 32210

**New Mailing Address:**

5513 ROOSEVELT BLVD.  
SUITE 248  
JACKSONVILLE, FL 32244

**FEI Number:** 59-2926920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KINNER, MANUELA B.  
5411 ORTEGA BLVD SUITE 5  
JACKSONVILLE, FL 32210 US

**Name and Address of New Registered Agent:**

KINNER, MANUELA B PRESIDE  
5513 ROOSEVELT BLVD.  
SUITE 248  
JACKSONVILLE, FL 32244 US

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.

SIGNATURE: M. B. KINNER

04/29/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KINNER, MANUELA B.,  
Address: 5411 ORTEGA STE #1  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: KINNER,, MANUELA B  
Address: 5413 ROOSEVELT BLVD.  
City-St-Zip: JACKSONVILLE, FL 32244

I hereby certify that the information supplied with this filing does not qualify for the 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 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: M. B. KINNER

PRES

04/29/2005

Electronic Signature of Signing Officer or Director

Date