

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L37857** (4)

1. Corporation Name

ACCOUNTING, BOOKKEEPING & TAX SERVICE, INC.



Principal Place of Business

Mailing Address

% ROBERT W. SETZER
11934 S.W. 78TH TERR.
MIAMI FL 33183

% ROBERT W. SETZER
11934 S.W. 78TH TERR.
MIAMI FL 33183

3. Date Incorporated or Qualified

12/19/1989

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 9974 SW 88TH ST

26 8306 Mills DR

4. FEI Number

65-0162615

Applied For

Not Applicable

22 Suite, Apt. #, etc.

93

27 Suite, Apt. #, etc.

553

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

23 City & State

MIAMI FLORIDA

28 City & State

MIAMI FL

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

24 Zip

33176

25 Country

DADE

29 Zip

33183

30 Country

DADE

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SETZER, ROBERT W.
11934 S.W. 78TH TERR.
MIAMI FL 33183

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

9974 SW 88 STREET # 93

83

84 City

MIAMI FL

85 Zip Code

33176

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D SETZER, ROBERT W.
STREET ADDRESS
11934 S.W. 78TH TERR.
CITY - ST - ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
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CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13.

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

D/P
SETZER ROBERT W.
9974 SW 88 STREET # 93
MIAMI FL 33176

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/96

Date

305.558.3300

Daytime Phone #

CR2E034 (12/95)