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Secretary of State

03-04-1999 90108 032 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **L47057**

1. Corporation Name
SIR TAX SERVICES, INC.



Principal Place of Business: ~~2030 TYLER ST~~
HOLLYWOOD FL 33020-4518
 US

Mailing Address: ~~2030 TYLER ST~~
HOLLYWOOD FL 33020-4518
 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **1930 TYLER STREET**
 Suite, Apt. #, etc. [blank]
 City & State: **Hollywood, FLORIDA**
 Zip: **33020** Country: **USA**

2a. Mailing Address: **1930 TYLER STREET**
 Suite, Apt. #, etc. [blank]
 City & State: **Hollywood, FLORIDA**
 Zip: **33020** Country: **USA**

3. Date Incorporated or Qualified: **01/29/1990**

4. FEI Number: **65-0165038** Applied For: Not Applicable:

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

6. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees:

8. This corporation owes the current year Intangible Personal Property Tax: Yes No

9. Name and Address of Current Registered Agent
CROSS, R. KEVIN
~~2030 TYLER ST~~
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent
 81 Name: **R. KEVIN CROSS, EA.**
 82 Street Address (P.O. Box Number is Not Acceptable): **1930 TYLER STREET**
 83 [blank]
 84 City: **Hollywood** FL 85 Zip Code: **33020**

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]* **EA - R. KEVIN CROSS, EA.** DATE: **1/4/99**

12. OFFICERS AND DIRECTORS

TITLE	PC	<input type="checkbox"/> DELETE
NAME	CROSS, R. KEVIN	
STREET ADDRESS	2030 TYLER ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	CROSS, STEPHANIE J	
STREET ADDRESS	2030 TYLER STREET	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	CROSS, MARGARET K	
STREET ADDRESS	1028 TYLER ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	1510 WASHINGTON STREET	
1.4 CITY-ST-ZIP	Hollywood, FLORIDA 33020	
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	1510 WASHINGTON STREET	
2.4 CITY-ST-ZIP	Hollywood, FLORIDA 33020	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: *[Signature]* **EA - R. KEVIN CROSS, EA.** DATE: **1/4/99** Daytime Phone #: **954/925-8080**

CR2E034 (11/98)