

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L61236

FILED
Apr 25, 2008
Secretary of State

Entity Name: TAX MANAGEMENT SERVICES CORPORATION

Current Principal Place of Business:

7995 N.W. 12TH STREET
SUITE 400
MIAMI, FL 33126 US

New Principal Place of Business:

1470 NW 107 AVENUE
SUITE C
MIAMI, FL 33172 US

Current Mailing Address:

7995 N.W. 12TH STREET
SUITE 400
MIAMI, FL 33126 US

New Mailing Address:

1470 NW 107 AVENUE
SUITE C
MIAMI, FL 33172 US

FEI Number: 65-0184780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRADO, ARENA J
7995 NW 12TH STREET
SUITE 400
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

PRADO, ARENA J
1470 NW 107 AVENUE
SUITE C
MIAMI, FL 33172 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: ARENA J. PRADO

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHAPONICK, EVELYN
Address: 7955 NW 12TH STREET, SUITE 400
City-St-Zip: MIAMI, FL 33126

Title: TS () Delete
Name: BATES, LISSETTE
Address: 7955 NW 12TH STREET, SUITE 400
City-St-Zip: MIAMI, FL 33126

Title: V () Delete
Name: PRADO, EDGAR
Address: 7995 N.W. 12TH STREET
City-St-Zip: MIAMI, FL 33126 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHAPONICK, EVELYN
Address: 1470 NW 107 AVENUE, SUITE C
City-St-Zip: MIAMI, FL 33172

Title: TS (X) Change () Addition
Name: BATES, LISSETTE
Address: 1470 NW 107 AVENUE, SUITE C
City-St-Zip: MIAMI, FL 33172

Title: V (X) Change () Addition
Name: PRADO, EDGAR
Address: 1470 NW 107 AVENUE, SUITE C
City-St-Zip: MIAMI, FL 33172 US

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: LISSETTE BATES

TS

04/25/2008

Electronic Signature of Signing Officer or Director

Date