

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N99000002630

**FILED**  
**Sep 28, 2010**  
**Secretary of State**

**Entity Name:** TAX RESOURCE CENTER OF FLORIDA, INC.

**Current Principal Place of Business:**

20401 NORTHWEST 2ND AVENUE  
SUITE 103  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

20401 NORTHWEST 2ND AVENUE  
SUITE 103  
MIAMI, FL 33169

**New Mailing Address:**

**FEI Number:** 65-0924785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

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

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:** NOAH MOMPOINT

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** MOMPOINT, NOE  
**Address:** 20401 NORTHWEST 2ND AVENUE  
**City-St-Zip:** MIAMI, FL 33169

**Title:** D  
**Name:** MCKENZIE, FRITZ  
**Address:** 20401 NW 2ND AVE  
**City-St-Zip:** MIAMI, FL 33169

**Title:** VP  
**Name:** FRANCOIS, LUCVENS  
**Address:** 12735 NW 8 AVENUE  
**City-St-Zip:** MIAMI, FL 33168

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** NOAH MOMPOINT

P

09/28/2010

Electronic Signature of Signing Officer or Director

Date