

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91526 010 ***150.00

DOCUMENT # **P000000093430**
1. Entity Name
EZTAX.COM, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 161 W. ROBERTSON ST.		3. Mailing Address 161 W. ROBERTSON ST.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State BRANDON, FL		City & State BRANDON, FL	
Zip 33511	Country USA	Zip 33511	Country USA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 65-1047749		Applied For <input type="checkbox"/>
			Not Applicable <input type="checkbox"/>
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
Name CHARLES I. HOLWELL			
Street Address (P.O. Box Number is Not Acceptable) 2402 CEDARCREST PL			
City VALRICO			
State FL			
Zip Code 33594			

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT NICHOLAS LADUCA 3632 CORDGRASS DRIVE VALRICO, FL 33594	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE PRESIDENT CHARLES I. HOLWELL 2402 CEDARCREST PL VALRICO, FL 33594	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles I. Holwell

**CHARLES I. HOLWELL
VICE PRESIDENT**

4/22/02

813-654-7766

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034B (12/01)