

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000022098

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** MORE ACCOUNTING SERVICES, INC.

**Current Principal Place of Business:**

251 N 65TH WAY  
HOLLYWOOD, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 245263  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

**FEI Number:** 65-1082866      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MORALES, LUIS M  
251 N. 65 WAY  
HOLLYWOOD, FL 33024      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** MORALES, LUIS M  
**Address:** 251 N 65TH WAY  
**City-St-Zip:** HOLLYWOOD, FL 33024

**Title:** VP  
**Name:** WORSHAM, PAMELA  
**Address:** 345 CARISSA DRIVE  
**City-St-Zip:** SATELLITE BEACH, FL 32937

**Title:** S  
**Name:** MORALES, SOLANGE  
**Address:** 3517 MARATHON STREET, APT 204  
**City-St-Zip:** LOS ANGELES, CA 90026

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

SIGNATURE: LUIS MORALES

DP

04/27/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date