

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000069946

FILED
Apr 19, 2002 8:00 AM
Secretary of State

Entity Name: TAXPRO BUSINESS CONSULTANTS, INC.

Current Principal Place of Business:

1645 NW 129TH STREET
N. MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 680182
N. MIAMI, FL 33168

New Mailing Address:

P.O. BOX 590326
TAMARAC, FL 33359

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORVIL, ANN S
1645 NW 129TH STREET
N. MIAMI, FL 33167

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HALEY, PAMELA
Address: P.O. BOX 680182
City-St-Zip: N. MIAMI, FL 33168

Title: D () Delete
Name: DORVIL, JOSEPH G
Address: 1645 NW 129TH STREET
City-St-Zip: N. MIAMI, FL 33167

Title: D () Delete
Name: CRAWFORD, TANYA M
Address: P.O. BOX 680182
City-St-Zip: N. MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HALEY, PAMELA
Address: P.O. BOX 590326
City-St-Zip: TAMARAC, FL 33359

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DORVIL, ANN SENDY
Address: P.O. BOX 590326
City-St-Zip: TAMARAC, FL 33359

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSEPH G. DORVIL

P

04/19/2002

Electronic Signature of Signing Officer or Director

_____ Date