## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000035416

Entity Name: MORGAN'S ACCOUNTING SOLUTIONS, INC.

FILED Apr 13, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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636 US HWY 1 821 27TH ST STE 301 STE 1

NORTH PALM BEACH, FL 33408 WEST PALM BEACH, FL 33407

Current Mailing Address: New Mailing Address:

636 US HWY 1 821 27TH ST

STE 301 STE 1 NORTH PALM BEACH, FL 33408 WEST PALM BEACH, FL 33407

FEI Number: 02-0577993 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ALDO BELTRANO, P.A. 1000 NORTH CONGRESS AVENUE SUITE G WEST PALM BEACH, FL 33409 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

 Name:
 MORGAN, SHERI
 Name:
 MORGAN, SHERI

 Address:
 636 US HWY 1, STE 301
 Address:
 821 27TH ST, STE 1

 City-St-Zip:
 NORTH PALM BEACH, FL 33408
 City-St-Zip:
 WEST PALM BEACH, FL 33407

Etter VD ( ) Delete Titler ( ) Observe ( ) & Hillion

Title: VP ( ) Delete Title: ( ) Change ( ) Addition Name: AGNEW. MICHAEL W Name:

 Name:
 AGNEW, MICHAEL W
 Name:

 Address:
 316 GLENN RD.
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33405
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHERI MORGAN PSTD 04/13/2007