

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000049333

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** AMERITAX RD, INC.

**Current Principal Place of Business:**

16457 NE 6TH AVENUE  
NORTH MIAMI BEACH, FL 33162 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 681978  
NORTH MIAMI, FL 33168 US

**New Mailing Address:**

**FEI Number:** 30-0075115

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DESORME, RAOUL AGENT  
18824 NW 80TH AVENUE  
MIAMI, FL 33015 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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** RAYMONVIL, MARIE JOSEE  
**Address:** 7649 DILIDO BOULEVARD  
**City-St-Zip:** MIRAMAR, FL 33023 US

**Title:** CEO  
**Name:** DESORME, RAOUL  
**Address:** 18824 NW 80TH AVENUE  
**City-St-Zip:** MIAMI, FL 33015 US

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:** RAOUL DESORME

VP

04/16/2012

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

\_\_\_\_\_  
Date