2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067911

City-St-Zip:

WEST PALM BEACH, FL 33407

Entity Name: A&M TAX AND PUBLIC SERVICES INC.

FILED Apr 28, 2006 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
6801 LAKE WORTH RD SUITE 258 LAKE WORTH, FL 33467				6801 LAKE WORTH RD SUITE 334 LAKE WORTH, FL 33467			
Current Mailing Address:				New Mailing Address:			
6801 LAKE WORTH RD SUITE 258 LAKE WORTH, FL 33467				6801 LAKE WORTH RD SUITE 334 LAKE WORTH, FL 33467			
FEI Number: 03-0385003 FEI Number Applied For () FEI N			FEI Nun	nber Not Appl	ot Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MUNOZ, MARIA C 5911 E BARBADOS WAY W PALM BEACH, FL 33407 US				MUNOZ, MARIA C 6801 LAKE WORTH RD SUITE 334 W PALM BEACH, FL 33407 US			
The above in the State		ubmits this statement for the p	ourpose o	f changing i	ts registered	office or registered agent, or bo	oth,
SIGNATURE:				04/28/2006			
	Electroni	c Signature of Registered Age	ent			Date	_
Election Carr	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () MUNOZ, MARIA 5911 E BARBAD W PALM BEACH	OS WAY		Title: Name: Address: City-St-Zip:	,	() Change () Addition	
Title: Name: Address: City-St-Zip:	VST () MUNOZ, ARIEL (5911 E BARBAD W PALM BEACH	OS WAY		Title: Name: Address: City-St-Zip:	MUNOZ, ARII 5911 E BARE		
Title: Name:	D () MINOZ, ARIEL 3			Title: Name:	!	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MARIA C MUNOZ P 04/28/2006