2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008
Secretary of State

DOCUMENT# P02000129095

Entity Name: AM INCOME TAX SERVICES, INC.

Current Principal Place of Business:

5449 S. SEMORAN BLVD
STE-12A3
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

5449 S. SEMORAN BLVD
STE-12A3
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 55-0809200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TARRAGONA, MANUEL
3019 FLORENCIA DR
KISSIMMEE, FL 34744 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: P ( ) Delete
Name: TARRAGONA, MANUEL
Address: 3019 FLORENCIA DR
City-St-Zip: KISSIMMEE, FL 34744

Title: VP ( ) Delete
Name: MURCIA, ANNETTE L
Address: 3019 FLORENCIA DR
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: MANUEL TARRAGONA P 01/31/2008

Electronic Signature of Signing Officer or Director Date