

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000017414

FILED
Sep 22, 2005
Secretary of State

Entity Name: SMALL BUSINESS ACCOUNTING SOLUTIONS AND TAX SERVICES, INC.

Current Principal Place of Business:

7435 NORTH WEST 57TH STREET
TAMARAC, FL 33319

New Principal Place of Business:

Current Mailing Address:

7435 NORTH WEST 57TH STREET
TAMARAC, FL 33319

New Mailing Address:

FEI Number: 05-0593618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITTER, CARL S
2527 NW 116 TERRACE
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

GILLIAN, MARTIN
7435 NORTH WEST 57TH STREET
TAMARAC, FL 33319 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: GILLIAN MARTIN

09/22/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: PITTER, CARL S.
Address: 7435 NW 57TH STREET
City-St-Zip: TAMARAC, FL 33319

Title: VPAT (X) Delete
Name: THOMAS, LISA A
Address: 7435 NORTH WEST 57TH STREET
City-St-Zip: TAMARAC, FL 33319

Title: SD (X) Delete
Name: THOMAS, LISA A
Address: 7435 NORTH WEST 57TH STREET
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: PITTER, CARL S
Address: 7435 NORTH WEST 57TH STREET
City-St-Zip: TAMARAC, FL 33319

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 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: CARL S. PITTER

PTSD

09/22/2005

Electronic Signature of Signing Officer or Director

Date