


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 07, 2008 08:00 A
Secretary of State

DOCUMENT # P03000068594		
1. Entity Name MAYA AZTECA INCOME TAX SERVICES OF PALM BEACH INC		
Principal Place of Business 625 S DIXIE HWY STE 7 LAKE WORTH, FL 33460	Mailing Address 625 S DIXIE HWY STE 7 LAKE WORTH, FL 33460	



01042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 51-0473231	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SILIS SENCION 625 S DIXIE HWY #7 LAKE WORTH, FL 33460		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		

SIGNATURE *Silis Sencion* **SILIS SENCION REG. AGENT 1/3/08**
(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GREC IA SENCION, SILIS 625 S DIXIE HWY STE 7 LAKE WORTH, FL 33460
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O SENCION, JAIME R 625 S DIXIE HWY #7 LAKE WORTH, FL 33460
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01/07/08-80011-021 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE <u><i>Silis Sencion</i></u> SILIS SENCION <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <u>1/3/08</u> <small>Daytime Phone #</small>