

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000068771

**FILED**  
**Apr 12, 2007**  
**Secretary of State**

**Entity Name:** THE BRANCH TAX SERVICE INC.

**Current Principal Place of Business:**

18184 NW 2ND AVENUE  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

15743 NW 40TH COURT  
OPA LOCKA, FL 33054

**New Mailing Address:**

7667 SHALIMAR ST  
MIRAMAR, FL 33023

**FEI Number:** 04-3718050

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRANCH, BRANDY  
15743 NW 40TH COURT  
OPA LOCKA, FL 33054 US

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

BRANCH, BRANDY L  
7667 SHALIMAR ST  
MIRAMAR, FL 33023 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:** BRANDY BRANCH

04/12/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** OFFI ( ) Delete  
**Name:** BRANCH, BRANDY L OWNER  
**Address:** 18184 NW 2ND AVE  
**City-St-Zip:** MIAMI, FL 33169

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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 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:** BRANDY BRANCH

OWNE

04/12/2007

Electronic Signature of Signing Officer or Director

Date