2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091684

FILED Apr 11, 2005 Secretary of State

Entity Name: JENNIE ROSA ACCOUNTING & TAX SERVICES, INC

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|--|---|--|---|---|
| | T MCNAB RO | AD | | |
| UITE 210 AMARAC | , FL 33321 | | | |
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| urrent M | ailing Addres | s: | New Mailing Addres | ss: |
| | T MCNAB RO | AD | | |
| UITE 210 AMARAC | , FL 33321 | | | |
| El Number: | 27-0066583 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| ame and | Address of C | urrent Registered Agent: | Name and Address of | of New Registered Agent: |
| OSA, JEN 34 EAST | NNIE RIVERBEND [| DRIVE | | |
| | FL 33326-222 | | | |
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| UNRISE, he above the State | named entity s of Florida. | 2 US | ourpose of changing its registere | ed office or registered agent, or both, |
| UNRISE, ne above the State | named entity s of Florida. RE: | 2 US | | ed office or registered agent, or both, Date |
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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: JENNIE ROSA P 04/11/2005