

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141292

FILED
May 01, 2005
Secretary of State

Entity Name: BUDGETAX CORPORATION

Current Principal Place of Business:

15660 SAN CARLOS BOULEVARD, SUITE 32
FORT MYERS, FL 339082567 BW

New Principal Place of Business:

Current Mailing Address:

15660 SAN CARLOS BOULEVARD, SUITE 32
FORT MYERS, FL 339082567 BW

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARAMESWARAN, ARUN
15660 SAN CARLOS BLVD.
STE 32
FORT MYERS, FL 33908 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: PARAMESWARAN, ARUN
Address: 15660 SAN CARLOS BOULEVARD, SUITE 32
City-St-Zip: FORT MYERS, FL 339082567 BW

Title: D () Delete
Name: PARAMESWARAN, RAGHUNATHAN D
Address: PRIVATE BAG 23, PLOT 513
City-St-Zip: LOBATSE, XX BOTSWANA XX

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 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: ARUN PARAMESWARAN

P

05/01/2005

Electronic Signature of Signing Officer or Director

Date