

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046095

Entity Name: LE TAX CENTER, INC.

FILED  
Apr 19, 2008  
Secretary of State

## Current Principal Place of Business:

2001 N. DIXIE HWY  
#D  
POMPANO BEACH, FL 33060

## New Principal Place of Business:

812 NE 125TH STREET  
NORTH MIAMI, FL 33161

## Current Mailing Address:

2001 N. DIXIE HWY  
#D  
POMPANO BEACH, FL 33060

## New Mailing Address:

812 NE 125TH STREET  
NORTH MIAMI, FL 33161

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

## Name and Address of Current Registered Agent:

ESTIME, WILFORD  
2001 N. DIXIE HWY  
#D  
POMPANO BEACH, FL 33060 US

## Name and Address of New Registered Agent:

ESTIME, WILFORD  
812 NE 125TH ST  
NORTH MIAMI, FL 33161 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: WILFORD ESTIME

04/19/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ESTIME, WILFORD  
Address: 13796 N.E. 11TH AVENUE  
City-St-Zip: NORTH MIAMI, FL 33161

Title: CFO ( ) Delete  
Name: JEAN-BAPTISTE, VLADIMYR  
Address: 4733 NW 60TH LANE  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: ESTIME, WILFORD  
Address: 812 NE 125TH ST  
City-St-Zip: NORTH MIAMI, FL 33161

Title: D (X) Change ( ) Addition  
Name: JEAN-BAPTISTE, VLADIMYR  
Address: 4733 NW 60TH LANE  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D ( ) Change (X) Addition  
Name: WINSOR, MONTAS  
Address: 7966 SW 7TH COURT  
City-St-Zip: NORTH LAUDERDALE, FL 33068

I hereby certify that the information supplied with this filing does not qualify 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: WILFORD ESTIME

PRES

04/19/2008

Electronic Signature of Signing Officer or Director

Date