

Aug. 09 05 01:54P

TAXSERVICES OF SO FL INC 3052

FILED
Sep 01, 2005 8:00 am
Secretary of State

08-17-2005 90002 011 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P04000065248			
1. Entry Name HANDY MAN JAMES II, INC.			
Principal Place of Business 9605 NASSAU DRIVE MIAMI, FL 33189		Mailing Address 9605 NASSAU DRIVE MIAMI, FL 33189	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. # etc.		Suite, Apt. # etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 11-3723462		Applied For No: Applicable	
5. Certificate of Status Desired ☐		Additional Fee Required \$8.75	
6. Name and Address of Current Registered Agent MULHALL, TAMMY 9605 NASSAU DRIVE MIAMI, FL 33189		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		FL Zip Code	
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 _____ DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee	
In accordance with s. 807.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT OWNER ☐ Delete JAMES MULHALL II 9605 NASSAU DR MIAMI, FL 33189	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAMMY MULHALL VICE PRESIDENT 9605 NASSAU DR MIAMI, FL 33189	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 true information.			
SIGNATURE: Tammy Mulhall		8/15/05 305255-3406	