2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000159557

Entity Name: TAX TIME EXPRESS INC

FILED Jun 07, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

1400 CASSAT AVENUE 5022 GATE PARKWAY

SUITE 208 SUITE 1

JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

4129 AUTREY AVENUE WEST 5022 GATE PARKWAY SUITE 208

JACKSONVILLE, FL 32210

JACKSONVILLE, FL 32256

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

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

JAMES, THOMPSON E JR JAMES, THOMPSON E JR 1400 CASSAT AVENUE 5022 GATE PARKWAY

SUITE 1 SUITE 208

JACKSONVILLE, FL 32205 US JACKSONVILLE, FL 32256 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: JAMES E. THOMPSON, JR. 06/07/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRFS () Delete Title: PRFS (X) Change () Addition THOMPSON, JAMES E JR THOMPSON, JAMES E JR Name: Name: 1400-1 CASSAT AVENUE 5022 GATE PARKWAY, SUITE 208 Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32256

Title: VΡ Title: **VPST** (X) Change () Addition () Delete Name: KAGILERY, JAMES Name: KAGILIERY, JAMES Z

1400-1 CASSAT AVENUE 5022 GATE PARKWAY, SUITE 208 Address: Address: JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32256 City-St-Zip: City-St-Zip:

Title: SECT Title: (X) Delete () Change () Addition

MILLETE, MANUEL A SR Name: Name: 4129 AUTREY AVENUE WEST Address: Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip:

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.

Ρ SIGNATURE: JAMES E. THOMPSON, JR. 06/07/2007