2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000055078

Entity Name: OPTIMUM TAX SERVICES, INC.

FILED Apr 15, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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13726 S.W. 12TH. STREET 335 SOUTH KROME AVENUE MIAMI, FL 33184

SUITE # 104

FLORIDA CITY, FL 33034 US

Current Mailing Address: New Mailing Address:

13726 S.W. 12TH. STREET 335 SOUTH KROME AVENUE MIAMI, FL 33184

SUITE # 104

FLORIDA CITY, FL 33034

FEI Number: 20-2702861 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ENRIQUEZ, JOSE D JR 13726 S.W. 12TH. STREET MIAMI, FL 33184

ENRIQUEZ, JOSE D JR. 335 SOUTH KROME AVENUE SUITE # 104 FLORIDA CITY, FL 33034 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: 04/15/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: ENRIQUEZ, GLORIA M ENRIQUEZ, GLORIA M PTE/D Name: Name: 13726 S.W. 12TH. STREET 335 SOUTH KROME AVENUE, # 104 Address: Address: City-St-Zip: MIAMI, FL 33184 US City-St-Zip: FLORIDA CITY, FL 33034 US

Title: VP,T Title: VP/D (X) Change () Addition () Delete

GONZALEZ, ESMERALDA Name: Name: ENRIQUEZ, JOSE D VP/D 15202 S.W. 168TH. TERRACE 335 SOUTH KROME AVENUE, # 104 Address: Address:

MIAMI, FL 33187 US FLORIDA CITY, FL 33034 US City-St-Zip: City-St-Zip:

Title: () Change (X) Addition Title: () Delete T/D ENRIQUEZ, JOSEPH J T/D Name: Name:

335 SOUTH KROME AVENUE, # 104 Address Address: City-St-Zip: City-St-Zip: FLORIDA CITY, FL 33034 US

Title: () Delete Title: S/D () Change (X) Addition ENRIQUEZ, ALICE C S/D Name: Name:

Address: Address: 335 SOUTH KROME AVE, # 104 City-St-Zip: City-St-Zip: FLORIDA CITY, FL 33034 US

I hereby certify that the information supplied with this filing does not qualify for the 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: GLORIA M. ENRIQUEZ P/D 04/15/2006