

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131077

Entity Name: FLORIDA TAX STORE INC.

FILED
May 05, 2008
Secretary of State

Current Principal Place of Business:

622 NORTH FLAGLER DRIVE
504
W PALM BCH, FL 33401

New Principal Place of Business:

Current Mailing Address:

622 NORTH FLAGLER DRIVE
#504
W PALM BCH, FL 33401

New Mailing Address:

622 NORTH FLAGLER DRIVE
504
W PALM BCH, FL 33401

FEI Number: 42-1683808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONNELLEY, THORNE MR.
622 NORTH FLAGLER DR
504
WEST PALM BEACH, FL 33401 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: PTSD () Delete
Name: DONNELLEY, THORNE MR.
Address: 622 NORTH FLAGLER DRIVE #504
City-St-Zip: WEST PALM BEACH, FL 33401 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: THORNE DONNELLEY

PTSD

05/05/2008

Electronic Signature of Signing Officer or Director

Date