2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000125443

Entity Name: CENTRAL FLORIDA ACCOUNTING & TAX SERVICES INC

FILED Jul 14, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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99 W PLANT ST. 9500 SATELLITE BLVD 180

WINTER GARDEN, FL 34787 US ORLANDO, FL 32837

Current Mailing Address: New Mailing Address:

PO BOX 121392 PO BOX 121392

CLERMONT, FL 347121392 US CLERMONT, FL 34712-139 US

FEI Number: 20-5644273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

VEGA, RICHARD RM BUSINESS SOLUTIONS INC 3014 ANDOVER CT. 9500 SATELLITE BLVD

MT. DORA, FL 32757 US ORLANDO, FL 32837 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: EDWIN RIVERA 07/14/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

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

VEGA, RICHARD M RIVERA, EDWIN Name: Name: 3014 ANDOVER CT. PO BOX 121392 Address: Address:

City-St-Zip: MT. DORA, FL 32757 City-St-Zip: CLERMONT, FL 347121392

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

RIVERA, DIANA Name: RIVERA, EDWIN Name: PO BOX 121392 Address: PO BOX 121392 Address:

CLERMONT, FL 347121392 CLERMONT, FL 347121392 City-St-Zip: 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: EDWIN RIVERA D 07/14/2007