2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P08000011962

Entity Name: PLACE 4 TAXES INCORPORATED

Current Principal Place of Business:

5833 W OAKLAND PARK BOULEVARD
319
LAUDERHILL, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1136
FORT LAUDERDALE, FL 33302 US

New Mailing Address:

FEI Number: 26-1883985 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WARE, CHARLETTE CEO
1307 E COMMERCIAL BOULEVARD
OAKLAND PARK, FL 33334 US

Name and Address of New Registered Agent:

WARE, CHARLETTE
1307 E COMMERCIAL BOULEVARD
OAKLAND PARK, FL 33334 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: CHARLETTE WARE 04/29/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WARE, CHARLETTE
Address: 5833 W OAKLAND PARK BOULEVARD 319
City-St-Zip: LAUDERHILL, FL 33313

Title: VP ( ) Delete
Name: ALFRED, NIGEL
Address: 5833 W OAKLAND PARK BOULEVARD 319
City-St-Zip: LAUDERHILL, FL 33313 US

Title: T ( ) Delete
Name: OZIAS, INC.
Address: 1307 E COMMERCIAL BOULEVARD
City-St-Zip: OAKLAND PARK, FL 33334 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CHARLETTE WARE P 04/29/2009
Electronic Signature of Signing Officer or Director Date