

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000054999

FILED
May 01, 2009
Secretary of State

Entity Name: MANAGEMENT & INVESTMENT STRATEGIES, INC.

Current Principal Place of Business:

2532 GRAND CENTRAL PARKWAY
#20
ORLANDO, FL 32839

New Principal Place of Business:

415 E PINE ST
STE 526
ORLANDO, FL 32801

Current Mailing Address:

2532 GRAND CENTRAL PARKWAY
#20
ORLANDO, FL 32839

New Mailing Address:

415 E PINE ST
STE 526
ORLANDO, FL 32801

FEI Number: 26-2740979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROFESSIONAL ACCOUNTANTS & CONSULTANTS INC
2471 E SEMORAN BLVD
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

TAX CARE INC
2471 E SEMORAN BLVD
APOPKA, FL 32703 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: TAX CARE INC

05/01/2009

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:

Title: PT () Delete
Name: WEDICK, JESSE J
Address: 2532 GRAND CENTRAL PARKWAY #20
City-St-Zip: ORLANDO, FL 32839

Title: VPS () Delete
Name: MUÑOZ, EVA
Address: 2532 GRAND CENTRAL PARKWAY #20
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: WEDICK, JESSE J
Address: 415 E PINE ST STE 526
City-St-Zip: ORLANDO, FL 32801

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: JESSE J WEDICK

PTS

05/01/2009

Electronic Signature of Signing Officer or Director

Date