2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# P08000066009

Entity Name: NUMBER TWO TAX SPECIALIST INC

Current Principal Place of Business:

6245 MIRAMAR PARKWAY
105
MIRAMAR, FL 33023 US

New Principal Place of Business:

5740 HOLLYWOOD BLVD
102-A
MIRAMAR, FL 33021 US

Current Mailing Address:

6245 MIRAMAR PARKWAY
105
MIRAMAR, FL 33023 US

New Mailing Address:

5740 HOLLYWOOD BLVD
102-A
MIRAMAR, FL 33021 US

FEI Number: 26-2944794 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILSON, SHAWNTAKIA
6245 MIRAMAR PARKWAY
105
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

WILSON, SHAWNTAKIA
5740 HOLLYWOOD BLVD
102-A
HOLLYWOOD, FL 33021 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: SHAWNTAKIA WILSON 04/24/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LUGO, JULIO E
Address: 6245 MIRAMAR PARKWAY
City-St-Zip: MIRAMAR, FL 33023 US

Title: VP ( ) Delete
Name: WILSON, SHAWNTAKIA
Address: 6245 MIRAMAR PARKWAY
City-St-Zip: MIRAMAR, FL 33023 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WILSON, SHAWNTAKIA T
Address: 5740 HOLLYWOOD BLVD102-A
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: P (X) Change ( ) Addition
Name: WILSON, SHAWNTAKIA
Address: 5740 HOLLYWOOD BLVD 102-A
City-St-Zip: HOLLYWOOD, FL 33021 US

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: SHAWNTAKIA WILSON P 04/24/2009
Electronic Signature of Signing Officer or Director Date