

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000042838

Entity Name: TAX PREP 4 LESS INC

**FILED**  
**Oct 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6813 SUNSET STRIP  
SUNRISE, FL 33313

**New Principal Place of Business:**

970 LAKE CARILLON DRIVE  
ST. PETERSBURG, FL 33716

**Current Mailing Address:**

6813 SUNSET STRIP  
SUNRISE, FL 33313

**New Mailing Address:**

970 LAKE CARILLON DRIVE  
ST. PETERSBURG, FL 33716

FEI Number: 45-2989951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RENE, CHARLES W  
6813 SUNSET STRIP  
SUNRISE, FL 33313 US

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

BILLS, SCOTT G  
970 LAKE CARILLON DRIVE  
ST. PETERSBURG, FL 33716 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: SCOTT BILLS

10/10/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: BILLS, SCOTT G  
Address: 970 LAKE CARILLON DRIVE  
City-St-Zip: ST. PETERSBURG, FL 33716

I hereby 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 all other like empowered.

SIGNATURE: SCOTT BILLS

CEO

10/10/2012

Electronic Signature of Signing Officer or Director

Date