

PLEASE READ ALL INSTRUCTIONS BEFORE COI

FILED

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 JUL 23 AM 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P36629

1. Corporation Name

TAX SERVICE OF AMERICA, INC.

1355 W PALMETTO PARK ROAD
1355 W PALMETTO PARK ROAD

2. Principal Office Address

1355 W PALMETTO PARK ROAD

3. Mailing Office Address

1355 W PALMETTO PARK ROAD

Suite, Apt. #, etc.

SUITE 104

Suite, Apt. #, etc.

SUITE 104

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

Zip

33486

Country

USA

Zip

33486

Country

USA

4. Date Incorporated or Qualified
To Do Business In Florida

11/11/1991

5. FEI Number
65-0286671

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$0.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

SIDNEY ABUSCH

Street Address (P.O. Box Number is Not Acceptable)
1355 W PALMETTO PARK ROADSuite, Apt. #, Etc.
SUITE 104City
BOCA RATONState
FLZip Code
33486

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 7/8/2004

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	SIDNEY ABUSCH	1355 W PALMETTO PARK ROAD	BOCA RATON, FL 33486

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIDNEY ABUSCH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/2004

Date

561-654-5862

Daytime Phone #

CH21081 (3/7/04)

ENCLOSURE

07/13/04
111900057

0030504238

JUL 12 2004

BANK OF AMERICA NA
111900057
07/13/04

023001162574033497

06/15 89/90

POS-4500453-1009068796
DEPOSIT ONLY 2250.00
07/09/04--01070--008

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July 19, 2004

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BUSINESS BANKING

Tax Payment Services Business Credit Cards Merchant Services

Account Summary > Account Activity > Check Details

Check Details

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☒ BASIC BUSINESS	Current Balance	\$42,672.89	Select Action
CHKG XXXXX0967	Check Number	1304	
	Post Date	07/13/2004	
	Amount	\$2,250.00	

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Front View
Click to zoom in and examine any area of your check. Click again to return to normal.

GUARDIAN MEDICAL GROUP LLC 10-03 5402 JEFFERSON HWY NEW ORLEANS, LA 70123		1304
PAY TO THE ORDER OF <i>Florida Department of State</i>		\$2,250.00
BANK ONE FOR <i>Pocahontas 36629</i>		1304
#001304 #0654001371		645680967
DATE <i>7/13/04</i>		100002250004



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