

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000000792

**FILED  
Feb 01, 2008  
Secretary of State**

**Entity Name:** TOTAL TAX & ACCOUNTING SERVICES, INC.

**Current Principal Place of Business:**

2454 MCMULLEN BOOTH RD  
BLDG D SUITE 607  
CLEARWATER, FL 337591353 US

**New Principal Place of Business:**

**Current Mailing Address:**

2454 MCMULLEN BOOTH RD  
BLDG D SUITE 607  
CLEARWATER, FL 337591353 US

**New Mailing Address:**

**FEI Number:** 59-3220645      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SUVAL, DORIS  
4232 CHESTERFIELD CIRCLE  
PALM HARBOR, FL 34683 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SUVAL, DORIS  
Address: 4232 CHESTERFIELD CIRCLE  
City-St-Zip: PALM HARBOR, FL 34683

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: DORIS SUVAL

PR

02/01/2008

Electronic Signature of Signing Officer or Director

Date