

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 AUG 23 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # P95000073231 (9)

1. Corporation Name

~~24 HR TAXES, INC.~~

UP24 24hrTAXES, Inc.



Principal Place of Business

Mailing Address

PO BOX 680187
ORLANDO FL 32868-0187

PO BOX 680187
ORLANDO FL 32868-0187

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 P.O. Box 680187

Suite, Apt. #, etc.

22 City & State

23 Orlando, FL

Zip

24 32868-0187

Country

25 Orange

2a. Mailing Address

26 P.O. Box 680187

Suite, Apt. #, etc.

27 City & State

28 Orlando, FL

Zip

29 32868-0187

Country

30 Orange

3. Date Incorporated or Qualified

09/20/1995

3a. Date of Last Report

08/07/1996

4. FEI Number

59-3457163

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

7. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

☒

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

Norlande Thelemarque

82 Street Address (P.O. Box Number is Not Acceptable)

7133 Hiawassee Oak Dr

83

84 City

Orlando

FL

85 Zip Code

32868

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Norlande Thelemarque

Norlande Thelemarque 8/14/97

12. OFFICERS AND DIRECTORS

TITLE PR ☒ DELETE

NAME BOURSQUOT, JEAN-MARIE F

STREET ADDRESS PO BOX 680651

CITY-ST-ZIP ORLANDO FL 32868-0651

TITLE VS ☐ DELETE

NAME THELEMARQUE, NERLANDE

STREET ADDRESS PO BOX 680651

CITY-ST-ZIP ORLANDO FL 32868-0651

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PT ☒ Change ☐ Addition

1.2 NAME Thelemarque, Norlande N/A

1.3 STREET ADDRESS P.O. Box 680187

1.4 CITY-ST-ZIP Orlando, FL 32868-0187

2.1 TITLE VS ☐ Change ☒ Addition

2.2 NAME Marie Rose Plaisance N/A

2.3 STREET ADDRESS P.O. Box 680187

2.4 CITY-ST-ZIP Orlando, FL 32868-0187

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME 800002284128-4

4.3 STREET ADDRESS -09/03/97-01073-009

4.4 CITY-ST-ZIP *****173.75 *****173.75

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)

UP2U, 24 H O U R TAXES, Inc.

Marie Nerlande Thelemarque
President

08/02/1997

Department of State
To Whom It May Concern:

Dear Sir Or Madam:


This letter is to explain to you why my fee of \$165.00 for the annual report should be considered for processing.

The address on file with you was changed to the above one by phone. My former P.O Box was cancelled and a request for forwarding all my mail to the above address was submitted to the Post Office. The first notice for the annual report was returned to your office, undelivered, that was the Post Office's mistake. This is to tell you that I never received it and that is why I did not file.

Please see at what capacity you can wave all the fees in extra of the \$165.00 as it was not something done intentionally from my part. and as I am in difficulties to find a such amount of money for the second notice. I promise that I will make certain that this does not happen again in the future

I really appreciate your time.

Sincerely;


Marie Nerlande Thelemarque, President