

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000089134

FILED
Aug 17, 2009
Secretary of State**Entity Name:** SSI ACCOUNTING AND TAX SERVICE, INC.**Current Principal Place of Business:**3620 COLONIAL BLVD
SUITE 230
FORT MYERS, FL 33966**New Principal Place of Business:**1342 COLONIAL BLVD
SUITE D-25
FORT MYERS, FL 33907**Current Mailing Address:**3620 COLONIAL BLVD SUITE 230
FORT MYERS, FL 33966**New Mailing Address:**1342 COLONIAL BLVD
SUITE D-25
FORT MYERS, FL 33907**FEI Number:** 65-0870536**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SCHMITZ, WERNER
% SSI ACCT+TAX SVC 3620 COLONIAL BLVD
SUITE 230
FORT MYERS, FL 33966 US**Name and Address of New Registered Agent:**SCHMITZ, WERNER
% SSI ACCT+TAX SVC 1342 COLONIAL BLVD
SUITE D25
FORT MYERS, FL 33907 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: SCHMITZ

08/17/2009

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: PTD () Delete
Name: SCHMITZ, WERNER
Address: % SSI ACCT+TAX SVC 3620 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33966

Title: VPSD () Delete
Name: SCHMITZ, HANNELORE
Address: % SSI ACCT+TAX SVC 3620 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33966

Title: VPD () Delete
Name: SCHMITZ, SEBASTIAN
Address: % SSI ACCT+TAX SVC 3620 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: SCHMITZ, WERNER
Address: % SSI ACCT+TAX SVC 1342 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: VPSD (X) Change () Addition
Name: SCHMITZ, HANNELORE
Address: % SSI ACCT+TAX SVC 1342 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: VPD (X) Change () Addition
Name: SCHMITZ, SEBASTIAN
Address: % SSI ACCT+TAX SVC 1342 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33907

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: SCHMITZ

PRS

08/17/2009

Electronic Signature of Signing Officer or Director_____
Date