


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000034642 1. Entity Name INDEPENDENT TAX SERVICE CORP.	
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Principal Place of Business 1183 W. 29 ST HIALEAH, FL 33012	Mailing Address 1183 W. 29 ST HIALEAH, FL 33012
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

OLARTE, MARCO
8974 NW 145 ST
MIAMI, FL 33018

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____


FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OLARTE, MARCO 8974 NW 145 ST. MIAMI, FL 33018
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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700136535827
10/01/08--01032--025 **150.00

**DO NOT WRITE
IN THIS SPACE**



12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marco Olarte 7/7/08 305-887-0001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED

08 SEP 29 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07072008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0935500	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required