2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2022
Secretary of State
6398263968CC

DOCUMENT# P12000083394

Entity Name: MORE MONEY 4 U TAX SERVICES INC.

Current Principal Place of Business:

5094 COCONUT CREEK PKWY
4591
MARGATE, FL 33063

Current Mailing Address:

5094 COCONUT CREEK PKWY
4591
MARGATE, FL 33063 US

FEI Number: 46-1110390

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MM4UTS
5094 COCONUT CREEK PKWY
4591
MARGATE, FL 33063 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: S,CASTILE 01/21/2022

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, MEETING DIRECTOR, CEO
Name	HANSON, JAMES
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063

Title	VP, EXECUTIVE SECRETARY, STATE FILING DIRECTOR
Name	FRANK, BRIAN
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063

Title	WEB INFORMATION COORDINATOR
Name	WITHERSPOON, ERICILDA
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063

Title	ASST. TREASURER
Name	HING, TEKESA
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063

Title	OVERSEER, COO, CMD, CO, T
Name	CASTILE, STEELE
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063

Title	EDUCATION & POLICY OFFICER, COMPLIANCE OFFICER
Name	REID, MARSHA
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063

Title	VC, SOCIAL NETWORKING DIRECTOR
Name	MAXWELL, TELESHA
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063

Title	DOF, MARKETING STRATEGIST
Name	REID, OSHANE
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063

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I hereby 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 all other like empowered.

SIGNATURE: STEELE CASTILE OVERSEER 01/21/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DOF, MARKETING STRATEGIST
Name	JEAN, ELIE
Address	5094 COCONUT CREEK PKWY 4591
City-State-Zip:	MARGATE FL 33063