

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000000288

**Entity Name:** B. RILEY WEALTH TAX SERVICES, INC.**Current Principal Place of Business:**11 RAYMOND AVE  
POUGHKEEPSIE, NY 12603**Current Mailing Address:**11 RAYMOND AVE  
POUGHKEEPSIE, NY 12603 US**FEI Number:** 11-2587324**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	MULLEN, MICHAEL
Address	11 RAYMOND AVE
City-State-Zip:	POUGHKEEPSIE NY 12603

Title	CEO
Name	MULLEN, MICHAEL
Address	11 RAYMOND AVE
City-State-Zip:	POUGHKEEPSIE NY 12603

Title	DIRECTOR
Name	KAPLAN, HENRY
Address	11 RAYMOND AVE
City-State-Zip:	POUGHKEEPSIE NY 12603

Title	CFO
Name	SWAIN, MARY
Address	11 RAYMOND AVE
City-State-Zip:	POUGHKEEPSIE NY 12603

Title	CHAIRMAN
Name	HASTINGS, CHUCK
Address	11 RAYMOND AVE
City-State-Zip:	POUGHKEEPSIE NY 12603

Title	COO
Name	ZANONE, PHILIP
Address	11 RAYMOND AVE
City-State-Zip:	POUGHKEEPSIE NY 12603

Title	GENERAL COUNSEL
Name	MARKUNAS, MICHAEL
Address	11 RAYMOND AVE
City-State-Zip:	POUGHKEEPSIE NY 12603

*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: MICHAEL MULLEN****CEO****04/02/2024**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date