

2-28-98 B-2349 C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K09150** (9)

1. Corporation Name
B.J.'S LIMO SERVICE, INC.

Principal Place of Business

Mailing Address

P.O. BOX 2537
LAKELAND FL 33806

P.O. BOX 2537
LAKELAND FL 33806



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 3454 AIRFIELD DR. W		26 3454 AIRFIELD DR. W		12/18/1987	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 Suite # 2		27 Suite # 2		59-2931203	
City & State		City & State		Applied For	
23 LAKELAND		28 LAKELAND		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 33811		29 33811		☐ \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing Trust Fund Contribution	
25 POLK		30 POLK		☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
JACOBS, DALE G. 3730 CLEVELAND HEIGHTS BLVD. LAKELAND FL 33813				Yes ☒ No ☐	
				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City		85 Zip Code	
		FL			

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☒ DELETE	1.1 TITLE	PRESIDENT & Director ☐ Change ☒ Addition
NAME	JACOBS, DALE G.	1.2 NAME	GEORGE COLLIS
STREET ADDRESS	3730 CLEVELAND HEIGHTS BLVD.	1.3 STREET ADDRESS	3545 AIRFIELD DR. Suite # 2
CITY-ST-ZIP	LAKELAND FL 33813	1.4 CITY-ST-ZIP	LAKELAND, FL 33811
TITLE	D ☐ DELETE	2.1 TITLE	
NAME	BULL, WILLIAM	2.2 NAME	
STREET ADDRESS	3730 CLEVELAND HEIGHTS BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33802	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE: **William Bull**

2/16/98 941-1665-6060

CR2E034 (10/97)