


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 05, 2003 8:00 am
Secretary of State

06-05-2003 90131 012 ***150.00

DOCUMENT # P01000053118
1. Entity Name
 INTERCOASTAL MOTORS & LLIMO SERVICE



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 2705 Ranch Rd
 Suite, Apt. #, etc.

3. Mailing Address
 2705 Ranch Rd
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 West Melbourne FL

City & State
 West Melbourne FL

4. FEI Number 02-0535372 **Applied For**
 Not Applicable

Zip 32904 **Country** USA **Zip** 32904 **Country** USA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
 Iosif Borca

Street Address (P.O. Box Number is Not Acceptable)
 2705 Ranch Rd

City West Melbourne **FL** **Zip Code** 32904

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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			
TITLE	D	TITLE	
NAME	Iosif Borca	NAME	
STREET ADDRESS	2705 Ranch Rd	STREET ADDRESS	
CITY-ST-ZIP	West Melbourne FL 32904	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 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 on an attachment with an address with all other like empowered.

SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** _____ **Daytime Phone #** _____

CR2E034B (12/02)

Attachment

90138619

~~#P~~ 100005318

Iosif Borca – Intercoastal Motors & Limo Services, Inc.
2705 Ranch Rd
West Melbourne FL 32904

June 2nd, 2003

Division of Corporation
PO Box 6227
Tallahassee, FL 32314

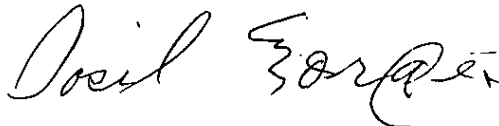
RE: UBR for Intercoastal Motors & Limo Services, Inc.

To Whom It May Concern:

Please find enclosed a check in the amount of \$150.00 and information for my 2002 Uniform Business Report. I respectfully request your forbearance for my late filing, but I never received a reminder for my annual report.

I thank you for your help in this matter.

Very truly yours,



Iosif Borca