2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 27, 2005 8:00 am Secretary of State DOCUMENT # P03000090661 04-27-2005 90358 020 ***150.00 JJ'S LIMOUSINES OF BREVARD, INC. Principal Place of Business Mailing Address 1757 S. PATRICK DR. 1757 S. PATRICK DR. INDIAN HARBOUR BEACH, FL 32937 INDIAN HARBOUR BEACH, FL 32937 2. Principal Place of Business 3. Mailing Address 1025 Homewood Ave 1025 Homewood Ave Suite, Apt. #, etc. Suite, Apt. #, etc. 04232005 CR2E034 (10/03) Chg-P Applied For City & State 4. FEI Number City & State Melbourne, FL Helbourne, FL 20-0162844 Not Applicable Country USA Country \$8.75 Additional 5. Certificate of Status Desired 32940 Brevard USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Shenbaum, Steven SHENBAUM, STEVEN Street Address (P.O. Box Number is Not Acceptable) 1757 S. PATRICK DR. INDIAN HARBOUR BEACH, FL 32937 Homewood Ave 1025 Melbourne 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. Therbacon, SIGNATURE_ (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition SHENBAUM, STEVEN NAME NAME 1025 HOMEWOOD AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 32940 CITY-ST-ZIP □ Delete TITLE ☐ Change Addition SHENBAUM, PAULINA NAME NAME 1025 HOMEWOOD AVE. STREET ADDRESS STREET ADDRESS MELBOURNE, FL 32940 CITY+ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ■ Addition IIILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

Steven Shenbaum Steven Shenbaum, President signature and typed on printed name of signing officer or director

FILED

321-501-8079