


2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 09, 2007 08:00 A
Secretary of State

DOCUMENT # S79305
 1. Entity Name
A CLEARWATER LIMOUSINE, INC.



Principal Place of Business 3371 TANGLEWOOD TRAIL PALM HARBOR, FL 34685 US	Mailing Address 3371 TANGLEWOOD TRAIL PALM HARBOR, FL 34685 US
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DO NOT WRITE IN THIS SPACE



03162007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3087561	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MEKLER, IRVIN
 3371 TANGLEWOOD TRAIL
 CLEARWATER, FL 33761**

DO NOT WRITE IN THIS SPACE

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

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MEKLER, IRVIN 3371 TANGLEWOOD TRAIL PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MEKLER, RONNIE S. 3371 TANGLEWOOD TRAIL PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: Irvin Mekler **3/15/07 727-789-2010**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #