

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

APPROVED AND FILED

1997 APR 21 AM 10:55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074988 (2)

1. Corporation Name PINERO & GUPTA LIMOUSINES, INC.

Principal Place of Business 11070 BLUE ROAN COURT JACKSONVILLE FL 32257

Mailing Address 11070 BLUE ROAN COURT JACKSONVILLE FL 32257-3994



3. Date Incorporated or Qualified 09/10/1996 3a. Date of Last Report

2. Principal Place of Business 21 6653 Powers Avenue 22 Suite 136 23 Jacksonville, Florida

2a. Mailing Address 26 6653 Powers Avenue 27 Suite 136 28 Jacksonville, Florida

4. FEI Number 59-3400138 Applied For Not Applicable

24 32217 25 Country 29 32217 30 Country

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

23 Jacksonville, Florida

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

24 32217 25 Country 29 32217 30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [X] Yes [] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CRAWFORD, JOHN R 225 WATER STREET #900 JACKSONVILLE FL 32202

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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 NAME PINIERO, SANDRA F STREET ADDRESS 11070 BLUE ROAN COURT CITY-ST-ZIP JACKSONVILLE FL 32257

1.1 TITLE [X] Change [] Addition 1.2 NAME PINEIRO, SANDRA F. 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 000002150380-00

TITLE D [] DELETE NAME GUPTA, JEANETTE M STREET ADDRESS 11001-621 OLD ST. AUGUSTINE ROAD CITY-ST-ZIP JACKSONVILLE FL 32257

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP *****165.00 *****165.00

TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

3.1 TITLE [] Change [] Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

4.1 TITLE [] Change [] Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

5.1 TITLE [] Change [] Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

6.1 TITLE 6.2 NAME per conversation on 4/21/97 not Jeanette Gupta & correct name is 4/21/97 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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. 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: JEANETTE M. GUPTA, DIRECTOR Mar. 16, 1997 (904) 731-9363

CR2E034 (9/96)