# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 26, 2007**
**Secretary of State**

DOCUMENT# P06000092882

**Entity Name:** AMERICANS LOVES LUXURY LIMOUSINES INC

**Current Principal Place of Business:**

16711 NW 79 AVE
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

18350 NW 2ND AVE
SUITE 500
MIAMI, FL 33169

**Current Mailing Address:**

16711 NW 79 AVE
MIAMI LAKES, FL 33016

**New Mailing Address:**

18350 NW 2ND AVE
SUITE 500
MIAMI, FL 33169

**FEI Number: 20-5196618** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TRICIA-ANN BLAIR, P.A.
18350 NW 2ND AVE
SUITE 500
MIAMI, FL 33169 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: LEWIS, CLIVE A
Address: 16711 NW 79 AVE
City-St-Zip: MIAMI LAKES, FL 33016

Title: VP ( ) Delete
Name: BLAIR, TRICIA-ANN A
Address: 16711 NW 79 AVE
City-St-Zip: MIAMI LAKES, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: LEWIS, CLIVE A
Address: 18350 NW 2ND AVE, SUITE 500
City-St-Zip: MIAMI, FL 33169

Title: VP (X) Change ( ) Addition
Name: BLAIR, TRICIA-ANN A
Address: 18350 NW 2ND AVE, SUITE 500
City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLIVE A. LEWIS P 04/26/2007

Electronic Signature of Signing Officer or Director — Date