Current Principal Place of Business:			CC00129	19924
2621 S STREE	Т			
WEST PALM B	EACH, FL 33407			
Current Mai	ling Address:			
608 52ND S WEST PALM	TREET / BEACH, FL 33407			
FEI Number: 02-0706444		Certificate of Status Desired: No		
Name and Address of Current Registered Agent:				
ANES, JOSEPH 608 52ND STREET WEST PALM BEACH, FL 33407 US				
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.				
The above name	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florid	da.
	d entity submits this statement for the purpose of changing its regis E: ANES JOSEPH	stered office or regis	U	_{da.} 04/11/2015
		stered office or regis	U	
	E: ANES JOSEPH Electronic Signature of Registered Agent	stered office or regis	U	04/11/2015
SIGNATUR	E: ANES JOSEPH Electronic Signature of Registered Agent	stered office or regis	U	04/11/2015
SIGNATURI Officer/Dire	E: ANES JOSEPH Electronic Signature of Registered Agent ctor Detail :			04/11/2015
SIGNATUR	E: ANES JOSEPH Electronic Signature of Registered Agent Ctor Detail :	Title	S	04/11/2015
SIGNATURE Officer/Dire Title Name	E: ANES JOSEPH Electronic Signature of Registered Agent Ctor Detail : D JUNIOR, JOSEPH 608 52ND STREET	Title Name Address	S PIERRE, HENRY	04/11/2015
SIGNATURE Officer/Dire Title Name Address	E: ANES JOSEPH Electronic Signature of Registered Agent Ctor Detail : D JUNIOR, JOSEPH 608 52ND STREET	Title Name Address	S PIERRE, HENRY 4650 GROVE ST	04/11/2015
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	E: ANES JOSEPH Electronic Signature of Registered Agent Ctor Detail : D JUNIOR, JOSEPH 608 52ND STREET WEST PALM BEACH FL 33407	Title Name Address	S PIERRE, HENRY 4650 GROVE ST	04/11/2015
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	E: ANES JOSEPH Electronic Signature of Registered Agent Ctor Detail : D JUNIOR, JOSEPH 608 52ND STREET WEST PALM BEACH FL 33407 D	Title Name Address	S PIERRE, HENRY 4650 GROVE ST	04/11/2015

I hereby 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 all other like empowered.

D

SIGNATURE: ANES JOSEPH

Electronic Signature of Signing Officer/Director Detail

FILED Apr 11, 2015 Secretary of State CC0012919924

Date

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000103854

Entity Name: WEST COAST TAXI, INC.