2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2011
Secretary of State

DOCUMENT# H70833

Entity Name: BAY AREA TAXI SERVICE, INC.

Current Principal Place of Business:

5201 GULF BLVD
ST. PETE. BEACH, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 66330
ST. PETERSBURG, FL 33736 US

New Mailing Address:

FEI Number: 59-2576567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VALLEE, CAROL B
5201 GULF BLVD
ST PETE BEACH, FL 33706 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

OFFICERS AND DIRECTORS:

Title: T
Name: VALLEE, JERRY E.
Address: 100 PUNTA VISTA DR
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: PT
Name: VALLEE, CAROL B.
Address: 9734 62 AVE. N
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: D
Name: VALLEE, JERRY E II
Address: 100 PUNTA VISTA DRIVE
City-St-Zip: ST. PETE BEACH, FL 33706 US

Title: D
Name: VALLEE, RENE L
Address: 9734 62ND AVENUE NORTH
City-St-Zip: ST. PETERSBURG,, FL 33708

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.

SIGNATURE: CAROL B VALLEE PRES 01/21/2011

Electronic Signature of Signing Officer or Director Date