

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K39870

Entity Name: A & M TAXI SERVICE, INC.

FILED  
Jan 17, 2008  
Secretary of State

**Current Principal Place of Business:**

16425 COLLINS AVE., #2716  
NORTH MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

16425 COLLINS AVE., #2716  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

FEI Number: 65-0225642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOPMAN, MIRIAM  
16425 COLLINS AVE., 2716  
MIAMI, FL 33160 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: STD ( ) Delete  
Name: GOPMAN, MIRIAM  
Address: 16425 COLLINS AVE., 2716  
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete  
Name: GOPMAN, MARTIN D  
Address: 16425 COLLINS AVENUE, #2716  
City-St-Zip: MIAMI, FL 33160

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: GOLDBERG, RITA  
Address: 16425 COLINS AVE., #2716  
City-St-Zip: MIAMI, FL 33160

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: MIRIAM GOPMAN

STD

01/17/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date