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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K95764

(2)

CALIENDO LIMOUSINE SALES, INC.

FILED

May 01 1998 8:00am

Secretary of State

Mailing Address

		1510 SW 17TH ST. OCALA FL 34474 US		DO NOT WRITE IN THIS SE 3. Date incorporated or Qualified	PACE	
A Principal D	lace of Business	Las Mailine Address		06/15/1989 4. FEI Number	, , ,	F 15
	CO SW 17 th St	2a. Mailing Address 26 15 20 51	4/ 17 th	5+ 59-2953499	· · · ·	plied For t Applicable
Sulte Apt		Suite, Apt. #, etc.	<u> </u>		\$8.75	
22		27		5. Certificate of Status Desired	Fee Re	
23 O C	Ala FL	City & State 28 OCAIA	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip 344	25 /// // // //	29 34474 a	Country ARI	Personal Property Tax due June 30.	Yes [angible No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent OALICATO COANT C. B. Name						
	LIENDO, FRANK E.			ļ		
				Address (P.O. Box Number is Not Acceptable)		
OCALA FL 34471						
					-p	
			84 City	FL	85 Zip C	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 c	changing its	s 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			required when reinstating) DATE	DIDECTOR	C 10 10
12.	PST OFFICERS AND	DELETE	13. 1.1 THILE	ADDITIONS/CHANGES TO OFFICERS AND I	Change	Addition
NAME	CALIENDO, DANIEL J.		12 NAME	_	•	
STREET ADDRESS	1510 SW 17TH ST	!	1.3 STREET ADDRESS	1520 SW 1745+	-	
CITY-ST-ZIP	OCALA FL		1.4 CITY - ST - ZIP	, = = = ,	_	
TITLE	D	DELETE	2.1 TITLE		Change	Addition C
NAME	CALIENDO, DANIEL J.		2.2 NAME			
STREET ADORESS	1510 SW 17TH ST		2.3 STREET ADDRESS	1520 SW 17+hS+		
CITY-ST-ZIP	OCALA FL		2.4 CITY-ST-ZIP		_	
TITLE	VPD	☐ DELETE	3.1 TITLE	Ĺ] Change	Addition
NAME	CALIENDO, FRANK		3.2 NAME			
STREET ADDRESS	505 SE 45TH TERRACE	I	3.3 STREET ADDRESS			
CITY-ST-ZIP	OCALA FL	DELETE	3.4. CITY-ST-ZIP		Change	Addition
TITLE		ון אנונונ	4.1 TITLE	; 	TI CHAHÎR	- Addition
NAME Street address			4.2 NAME 4.3 Street address]
CITY-ST-ZIP			4.4 CITY+ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME		_ -	5.2 NAME		•	İ
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		:	5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME		I	62 NAME			İ
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			

14. I 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; 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 in Block 12 or Block 13 if changed, or of an attachment with an address.