


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jun 14, 2004 8:00 am**  
**Secretary of State**

06-14-2004 90001 004 \*\*\*150.00

<b>DOCUMENT # L27985</b>	
<b>1. Entity Name</b> Y & G TAXI CORP.	

<b>Principal Place of Business</b> 2000 ISLAND BLVD 2905 NORTH MIAMI BEACH FL 33160 US	<b>Mailing Address</b> 2000 ISLAND BLVD 2905 NORTH MIAMI BEACH FL 33160 US
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34031247



MOORE CR2E034 (11/03)

<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

<b>4. FEI Number</b> 65-0156233	<b>Applied For</b> <input type="checkbox"/> Not Applicable
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<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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<b>6. Name and Address of Current Registered Agent</b>	
SERNS, DAVID 2040 N.E. 163RD STREET SUITE 302 NORTH MIAMI BEACH FL 33162	

<b>7. Name and Address of New Registered Agent</b>	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

**8.** 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. I am familiar with, and accept the obligations of registered agent.

**SIGNATURE** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE	ST <input type="checkbox"/> Delete
NAME	AROCH, GITTA
STREET ADDRESS	2000 ISLAND BLVD
CITY-ST-ZIP	N MIAMI BCH FL
TITLE	PS <input type="checkbox"/> Delete
NAME	YEHUDA, AROCH
STREET ADDRESS	2000 ISLAND BLVD
CITY-ST-ZIP	N MIAMI BCH FL
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**12.** 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **GITTA AROCH** 4-20-04 (805) 466-9463

# GILBERT MILLER

CERTIFIED PUBLIC ACCOUNTANT

17564 S.W. 29<sup>TH</sup> LANE, MIRAMAR, FL 33029  
PHONE: (954) 450-1932 • FAX: (954) 450-1932  
E-MAIL: cpagm@bellsouth.net

Attachment 57057247

June 11, 2004

Division of Corporations  
Annual Report Section  
P.O. Box 6850  
Tallahassee, FL 32314

RE: #L27985

Y & G Taxi Corp.  
2000 Island Blvd. #2905  
North Miami Beach, FL 33160

Enclosed please find 2004 For Profit Corporation Annual Report for the above named corporation.

The return was prepared and mailed on April 21, 2004 as per the cancellation stamp on the envelope, but was put into the envelope facing the wrong direction. The U.S. Postoffice held the return for many weeks before they returned it to the sender.

Because of the unusual circumstances enumerated above and the fact that the return was mailed on time we would appreciate your accepting the return as filed on time and waive the penalty for late filing.

Thank you for your consideration.

Very truly yours,

Gilbert Miller, CPA

Encl.