

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2003 8:00 am
Secretary of State

07-31-2003 90072 018 ***158.75

0117626 AV

DOCUMENT # P00000004782

1. Entity Name
LUXURY LIMOS OF THE TREASURE COAST, INC.



Principal Place of Business
**734 BUCK HENDRY WAY.
SUITE A
STUART FL 34994
US**

Mailing Address
**734 BUCK HENDRY WAY
SUITE A
STUART FL 34994
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0977813**

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~TESTA, DAWN E ADMIN~~
**672NW SUNSET DRIVE
STUART FL 34994**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO TESTA, LEONARD J 672 NW SUNSET DRIVE STUART FL 34994	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO TESTA, LEONARD J DIRECTO 672 NW SUNSET DRIVE STUART FL 34994	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Leonard J. Testa
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

LEONARD J. TESTA
772-6923733

CR2E034 (4/03)

Attachment#

80135032

PO0000004782

CLASSIC COACH AND CARRIAGE

LUXURY LIMOS OF THE TREASURE COAST, INC.

(772) 692-3733 • (772) 871-1747 • FAX: (772) 692-3732 • TOLL FREE: (877) 222-5466

FLORIDA DEPARTMENT OF STATE
Division of Corporations

Sirs.

Please be advised that I am
writing this letter as outlined in
UBR Information section. I have
not received any prior notice for
report filing. I am requesting late
filing fee's be waived. I've enclosed
one check #4747 for the sum of \$158.75
for Document PO0000004782 UBR 2003.
STATUS CERTIFICATE
Thank you in Advance for your
consideration & prompt attention

LEONARD J. JESTA CO.

[Signature]

PLEASE ALSO NOTE
that we did pay late fee
of \$400.00 for 2002.
we NEVER received refund
that was requested.