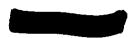
FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0100000 8891

1. Entity Name ANDY TAXI, CORP.

FILED Jul 10, 2002 8:00 am Secretary of State

05-10-2002 90036 001 ***150.00



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2. Principal Place	3. Mailing Address	SAME		38464	`,	
Suite, Apt. #, et	c.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE.	
City & State	11. FL	City & State			4 FEI Number DOLLET TAO VApplied For	i
33150 Country USA		Zip	Cour	ntry	Certificate of Status Desired	
	ikas olga pa namasan janasa	Maria de la Companya			7. Name and Address of Current Registered Agent	
	DO NOT W			Name	OF (111300)	
	DO NOT W	and the complete of the comple		Street Address ((P.O. Box Number is Not Acceptable)	- -
	in this sp	ACE		198	NW 79 th St	
110				City MIA	FI Zip Code	
8. The above name	ed entity submits this statement far	the purpose of changing its	s register	ed office or register	red agent, or both, in the State of Florida.	
SIGNATURE	the styling or bristed married registrated agent an	entre i applicable. (NOI	E: Registere	d Agent signeture required	when renssaing) OATE	
Tax fiting require (See criteria on t		January 1 - 1 After May Amende Make Check Payal	fay 1 Fo 1:Fee I d UBR I	se is \$150.00 s \$550.00 s \$51.25	10. Election Campaign Financing \$5.00 May Be	
.11. \\ -m.e.\	OFFICERS AND D	IRECTORS - /	300 H	Section 12 acres		
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STREET ADDRESS /	IEIL GREENE		3.3333	T ADDRESS.		2
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TITLE NAME	PHL	020661	TIRLE		and the second s	บี ว
STREET ADDRESS CITY-ST-ZIP	pHC prentures, FC	33067		T ACCEPTESS.		5
TITLE	<u> </u>	,	e Im. C			
NAME STORET ADDRESS			NAME			
STREET ADDRESS CITY-ST-ZIP			CITY	TADDRESS	DO NOT WRITE	
IIILE			nne		**************************************	
NAME			NAME		IN THIS SPACE	
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NAME			TITLE MALE			
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TITLE "			inc			
STREET ADDRESS			STREET	ACORESS		
CITY-ST-ZIP			CITY S	□ZIP		
13. I hereby certify the	at the information supplied with this	s filing does not qualify for t	ne exemi	otion stated in Section	ion 119.07(3)(i), Florida Statutes, I further certify that the information	

initiated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director attachment with an address, with all other like empowered.