


FILED
Feb 18, 2008 08:00 AM
Secretary of State

**2008 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P01000063651
 1. Entity Name
ANDREW LIMOUSINE SERVICES, INC.



Principal Place of Business 9110 PALOMINO DRIVE LAKE WORTH, FL 33467	Mailing Address 9110 PALOMINO DRIVE LAKE WORTH, FL 33467
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01232008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1120103	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 TORO, JAIME
 9110 PALOMINO DRIVE
 LAKE WORTH, FL 33467

**DO NOT WRITE
 IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and state if applicable (NOTE: Registered Agent's signature required when remaining)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$350.00.**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TORO, JAIME 9110 PALOMINO DRIVE LAKE WORTH, FL 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TORO, MAGDA 9110 PALOMINO DRIVE LAKE WORTH, FL 33467
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 807, 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 empowers.

SIGNATURE: Jaime Toro 1-29-08 PRESID. 561-236-9463
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Office Phone #)