

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State
 05-23-2002 90058 044 ***150.00

DOCUMENT # P01000065141

1. Entity Name

ALWAYS AVAILABLE LIMOUSINE SERVICE, INC.

Principal Place of Business

**3819 NW 49TH STREET
 TAMPA FL 33309**

Mailing Address

**3819 NW 49TH STREET
 TAMPA FL 33309**

2. Principal Place of Business

3681 W. OAKLAND PARK BLVD.
 Suite, Apt. #, etc.

3. Mailing Address

3681 W. OAKLAND PARK BLVD.
 Suite, Apt. #, etc.

City & State

LAUDERDALE LAKES FL

City & State

LAUDERDALE LAKES FL

Zip

33311

Country

USA

Zip

33311

Country

USA

4. FEI Number

PENDING

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SICKLES, BARRY M ESQ
 3300 UNIVERSITY DRIVE SUITE 210
 CORAL SPRINGS FL 33065**

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **GOLDSTEIN, REGINA**
 STREET ADDRESS **3819 NW 49TH STREET**
 CITY-ST-ZIP **TAMPA FL 33309**

TITLE **VD** ☐ Delete
 NAME **GOLDSTEIN, CRAIG**
 STREET ADDRESS **3819 NW 49TH STREET**
 CITY-ST-ZIP **TAMPA FL 33309**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **3681 W. OAKLAND PARK BLVD.**
 CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **3681 W. OAKLAND PARK BLVD.**
 CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02 Date

954-731-1115 Daytime Phone #

CR2E034 (9/01)