2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Jun 21, 2004 08:00 AM DOCUMENT # P02000051052 **Secretary of State** 1. Entity Name PRESTIGE LIMOUSINE SERVICE, INC. Mailing Address Principal Place of Business 1358 FOUNTAIN VIEW DR 1358 FOUNTAIN VIEW DR ROCKLEDGE, FL 32955 ROCKLEDGE, FL 32955 CR2E034 (10/03) 06182004 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0448442 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BUDDEMEYER, RONALD C 1358 FOUNTAIN VIEW DR ROCKLEDGE, FL 32955 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. RTLE NAME BUDDEMEYER, RONALD C 1358 FOUNTAIN VIEW DR STREET ADDRESS U00000162765 CITY-ST-ZIP ROCKLEDGE, FL 32955 TITLE D BUDDEMEYER, ELIZABETH L NAME 1358 FOUNTAIN VIEW DR STREET ADDRESS CITY-ST-ZIP ROCKLEDGE FL 32955 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 of 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.