

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000055988	
1. Entity Name LILY'S DRIVING SCHOOL, INC.	

Principal Place of Business 3006 AVIATION AVE STE 4-B COCONUT GROVE, FL 33133	Mailing Address 3006 AVIATION AVE STE 4-B COCONUT GROVE, FL 33133
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DO NOT WRITE IN THIS SPACE



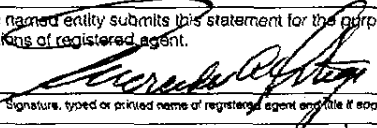
04072006 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0741295	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ORTEGA, MERCEDES A 3006 AVIATION AVE STE 4-B COCONUT GROVE, FL 33133
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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:  **MERCEDES A. ORTEGA** **4-7-06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

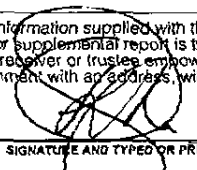
9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD GONZALEZ, LILIA A 3006 AVIATION AVE STE 4-B COCONUT GROVE, FL 33133
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04/22/06-80103-022 150.00

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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 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:  **LILIA ANA GONZALEZ, President** **4-7-06** **305-710-4942**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #