

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086062

Entity Name: EQUINE LIMOUSINE, INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

4880 NE 132ND PLACE
ANTHONY, FL 32617

New Principal Place of Business:

Current Mailing Address:

4880 NE 132ND PLACE
ANTHONY, FL 32617

New Mailing Address:

FEI Number: 02-0642933

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECHTOLD, BRUCE
4880 NE 132ND PLACE
ANTHONY, FL 32617 US

Name and Address of New Registered Agent:

WICKS, KARLA
4880 NE 132ND PLACE
ANTHONY, FL 32617 US

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: KARLA WICKS

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BECHTOLD, BRUCE
Address: 4880 NE 132ND PLACE
City-St-Zip: ANTHONY, FL 32617

Title: SVP () Delete
Name: WICKS, KARLA
Address: 4880 NE 132ND PLACE
City-St-Zip: ANTHONY, FL 32617

Title: V () Delete
Name: HOCHBERG, GARY
Address: 5799 ORANGE DRIVE
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KARLA WICKS

SVP

04/18/2006

Electronic Signature of Signing Officer or Director

Date