2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106671

Title:

Name:

Address:

SD

GREEN, GLENN G

City-St-Zip: LOCUST GROVE, VA 22508 US

507 YORKTOWN BLVD.

(X) Delete

FILED Aug 06, 2007 Secretary of State

Entity Nam	1e: HIGH ROL	LER\$ LIMOUSINE, INC.				
Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
7440 HILLS TAMPA, FL	BOROUGH AV 33610 US	Æ.				
Current Ma	ailing Address	:	New Maili	New Mailing Address:		
7440 HILLSBOROUGH AVE. TAMPA, FL 33610 US				P.O. BOX 1722 BRANDON, FL 33509 US		
FEI Number: 03-0485874		FEI Number Applied For ()	FEI Number Not Applicable ()		Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
3006 JAP T PALNT CIT	Y, FL 33566 named entity su	US	urpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATUR		Oissantina of Danishara I Assa			Data	
Election Cam	e with s. 607.193(Signature of Registered Age 2)(b), F.S., the corporation did no Trust Fund Contribution (). ORS:	t receive the prior notic		TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD ()[BENTON, ROBEI 3006 JAP TUCKE PLANT CITY, FL	ER .	Title: Name: Address: City-St-Zip:	PSTD (X BENTON, ROB 3006 JAP TUC PLANT CITY, F	KER	
Title: Name: Address: City-St-Zip:	VD (X) I MIMBS, MICHAE 3014 STARMOUI VALRICO, FL 33	IT DR.	Title: Name: Address: City-St-Zip:	()) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT A BENTON PSTD 08/06/2007

() Change () Addition