# 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

# **FILED** Jun 04, 2004 8:00 am Secretary of State 06-04-2004 90005 018 \*\*\*160.00

DOCUMENT # P02000127767  1. Entity Name XCLUSIVE LIMOUSINE, INC.					06-04-2004 90005 018 ***160.00				
Principal Place 290 NE 169 NORTH MIAM	*	Mailing Address 290 NE 169 STREET NORTH MIAMI BEACH, FL 33162		54056833					
2. Principal P	ace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.					CR2E034 (10/03)		
City & State		City & State		05082004 74: FEI Number	Chg-P		plied For		
					APPLIEC	FOR 86-11	02733 No	t Applicable	
Zip	Country	Zip	Country		5. Certificate o	f Status Desired	S8.75 Add Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
ARAUZ, JULIO 290 NE 169 STREET				Street Address (P.O. Box Number is Not Acceptable)					
	AMI BEACH, FL 33162			Sheet Address (1.0. Dox Number is Not Address (2.0.					
	j			^2			- 17° Cod		
				City			FL Zip Code		
	named entity submits this statemen ions of registered agent.	for the purpose of changing its	registered	d office or register	ed agent, or both	, in the State of Flo	rida. Tam familiar with,	and accept	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOT	E: Registered /	Agent signature required	when reinstating)		DATE		
	E NOWIII FEE IS \$550.00 ue by September 8, 2004	9. Election Campa Trust Fund Cont			.00 May Be ed to Fees				
10.		ID DIRECTORS	11.		ADDITION\$/0	HANGES TO OFFI	CERS AND DIRECTORS		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	P ARAUZ, JULIO 290 NE 169 STREET NORTH MIAMI BEACH, FL 33	Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP			. Change	☐ Addition	
TITLE	*	☐ Delete	TITLE				☐ Change	Addition	
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STREET ADDRESS				T ADDRESS			•	•	
CITY-ST-ZIP	<u> </u>	Delete	TITLE	51-218	····		☐ Change	Addition	
NAME	9	,	NAME;	1			. –	_	
STREET ADDRESS CITY-ST-ZIP	;	•	CITY-S	T ADDRESS ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP.		. Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-S				☐ Change	Addition	
ı∡. i nereby o indicated	certify that the information supplied won this report or supplemental repo	vioritilis filling does not qualify fo this true and accurate and that i	n the exem my signatu	iption stated in Se ire shall have the :	same lenst effect	, Florida Statutes. I as if made under d	numer certify that the if	or director	

indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as in hade order oam; that if an an officer of checkor 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.

ME OF SIGNING OFFICER OR DIRECTOR

305-389-9517

attachner

54056833



Date of this notice: 04-22-2004

Employer Identification Number: 86-1102935

000883.127036.0005.001 1 MB 0.309 842

Form: SS-4

Number of this notice: CP 575 A

#

For assistance you may call us a 1-800-829-4933

XCLUSIVE LIMOUSINE INC 298 NE 1697H ST NORTH MIAMI BEACH FL

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 86-1102935. This EIN will identify your business account, tax returns, and documents even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible, you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, it may cause a delay in processing and may result in incorrect information in your account. It also could cause you to be assigned more than one EIN.

Based on the information from you or your representative, you must file the following form(s) by the date shown next to it.

#### Form 1120

#### 04/19/2004

After our review of your information, we have determined that you are delinquent for the above-mentioned tax period(s) dating as far back as 2003. Please file your return(s) by 05-07-2004. Penalties and interest will continue to accumulate from the due date of the return(s) until it is filed. If you were not in business or did not hire any employees for the tax period(s) in question, please file the return(s) showing you have no liabilities. If you need tax forms, you can call 1-800-829-3676 or you can download the forms from the IRS website at www.irs.gov.

If you have questions about the form(s) or the due date(s) shown, you can call us at 1-800 829-4933 or write to us at the address at the top of the first page of this letter. If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a determination of your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Revenue Procedure 98-01, 1998-1 I.R.B.7 (or the superceding revenue procedure for the year at issue).

attachnent

540576833 # PO2000127767

(IRS USE ONLY) 575A

04-22-2004 XCLU B 0534456798 SS-4

If you're required to deposit employment taxes (Form 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). Under separate cover we will also send you a Personal Identification Number. For more information about EFTPS, call 1-800-829-3676 and request Publication 966, Now a Full Range of Electronic Choices to Pay All Your Federal Taxes. If you need to make a deposit before you receive your Welcome Package, you can use the enclosed FTD Coupon, Form 8109-8.

## IMPORTANT REMINDERS:

- \* Keep a copy of this notice in your permanent records.
- Use this EIN and your name exactly as they appear above on all your federal tax forms.
- \* Refer to this EIN on your tax related correspondence and documents.

Thank you for your cooperation.

Note: If you change your corporation to an S corporation, you must file Form 2553, Election by a Small Business Corporation.

Note: "If you change your business to a corporation, you may need to file Form 8832, Entity Classification Election. See forms for instructions to determine if you are required to file.