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407-240-4533 Daylme Phone #

| ANNUAL REPORT   |  |  |   |   | Apr 16, 2008 08:0   |   |  |
|---|--|--|---|---|---|---|--|
| DOCUMENT # P03000062094  1. Entity Name NORIS LIMOUSINES INC  |  |  |   |   | ,   | Secretary of St   |  |
| 3123 CRESTED CIRCLE 3123  |  | Mailing Address<br>3123 CRESTED CIRCLE<br>ORLANDO, FL 32837  |   |   | 18481   144   184   184   184   184   184   184   184   184   184   184   184   184   184   184 |   |  |
| C   | OO NOT WRITE   | CE   | 04132008 No Chg-P CR2E034 (11/05)  4. FEI Number  |   |   |   |  |
| 6. Name and Address of Current Registered Agent  KOSACOLSKY, JORGE I 3123 CRESTED CIRCLE  ORLANDO, FL 32837 |  |  | DO NOT WRITE IN THIS SPACE  ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept |   |   |   |  |
| the obligate SIGNATURE.   | Signature, typed or printed name of registered agent and  E NOW!!! FEE IS \$150.00  By 1, 2008 Fee will be \$550.00  | 9. Election Campaign Fina  | ed Agent signature required   |   |   | DATE 900255   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                                 | OFFICERS AND DII P KOSACOLSKY, JORGE I 3123 CRESTED C R ORLANDO, FL 32837  | RECTORS  |   |   |   |   |  |
| TITLE NAME STREET ADDRESS CHY-ST-ZIP  TITLE NAME STREET ADDRESS CHY-ST-ZIP                                  |  |  | DO NOT WRITE<br>IN THIS SPACE   |   |   |   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP -TITLE NAME   | ·  |  | -   |   |   |   |  |
| STREET ADDRESS CITY-ST-ZIP  12. I hereby condicated of the corchanged,                                      | certify that the information supplied with thi<br>on this report or supplemental report is tru<br>poration or the receiver or trustee empowe<br>or on an attachment with any address, with | s filing does not qualify for the exe<br>e and accurate and that my signa<br>red to execute this report as requ<br>all other like empoyared. | emptions contained<br>ture shall have the<br>tired by Chapter 607   | in Chapter 119<br>same legal effec<br>, Florida Statute | 3, Florida Statutes I i<br>ct as if made under or<br>ss; and that my name                       | further certify that the information ath; that I am an officer or director appears in Block 10 or Block 11 if |  |

PRES.

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TORGE KOSACOLSKY

SIGNATURE: \_