

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 8:00 am
Secretary of State

05-24-2004 90004 009 ***150.00

DOCUMENT # P03000063163 1. Entity Name EXTRAVAGANZA LIMOUSINE SERVICES, INC			
Principal Place of Business 4135 SW 186 WAY MIRAMAR, FL 33029 US		Mailing Address 4135 SW 186 WAY MIRAMAR, FL 33029 US	
2. Principal Place of Business 911 NW 209 AVE. Suite, Apt. #, etc. 102 City & State PEMBROKE PINES, FL		3. Mailing Address 911 NW 209 AVE Suite, Apt. #, etc. 102 City & State PEMBROKE PINES, FL	
Zip 33029 Country USA		Zip 33029 Country USA	
4. FEI Number 33-1060649		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		03082003 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent GBS CONSULTANTS 1290 WESTON RD. SUITE 306 WESTON, FL 33326		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P URIBE, LUIS E 4135 SW 186 WAY MIRAMAR, FL 33029	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GALLEG0, OLGA L 4135 SW 186 WAY MIRAMAR, FL 33029	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>LUIS E. URIBE</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>05/19/2004</u> <small>Date Daytime Phone #</small>	

54055442





Attachment
Division of Corporations

54053442

2004 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	P03000063163
Business Entity Name	EXTRAVAGANZA LIMOUSINE SERVICES, INC
Original File Date	06/06/2003

FEI Number

Principal Address 4135 SW 186 WAY
MIRAMAR, FL 33029 US

Mailing Address 4135 SW 186 WAY
MIRAMAR, FL 33029 US

Registered Agent GBS CONSULTANTS
1290 WESTON RD.
SUITE 306
WESTON, FL 33326 US

Officer/Director Name And Address

P
LUIS E URIBE
4135 SW 186 WAY
MIRAMAR, FL 33029 US

VP
OLGA L GALLEG0
4135 SW 186 WAY
MIRAMAR, FL 33029 US

S
LUIS E URIBE
4135 SW 186 WAY
MIRAMAR, FL 33029 US

T
OLGA L GALLEG0
4135 SW 186 WAY
MIRAMAR, FL 33029 US