

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2005 8:00 am
Secretary of State

05-09-2005 90292 042 ***150.00

DOCUMENT # P04000080252

1. Entity Name

A EXECUTIVE LIMOUSINE, INC.



Principal Place of Business

13549 BRIGHTSTONE ST
WEST PALM BEACH FL 33414

Mailing Address

13549 BRIGHTSTONE ST
WEST PALM BEACH FL 33414



2. Principal Place of Business

2159 Polo Gardens Drive

3. Mailing Address

2159 Polo Gardens Dr.

Suite, Apt. #, etc.

Apt. 103

Suite, Apt. #, etc.

Apt. 103

City & State

Wellington, FL

City & State

Wellington FL

Zip

33414

Country

Zip

33414

Country

4. FEI Number

06-1725149

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/04)

6. Name and Address of Current Registered Agent

ROCCO, PAUL
13549 BRIGHTSTONE ST
WEST PALM BEACH FL 33414

7. Name and Address of New Registered Agent

Name

Paul Rocco

Street Address (P.O. Box Number is Not Acceptable)

2159 Polo Gardens Dr.

Apt. 103

City

Wellington

FL

Zip Code

33414

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

Paul Rocco

Pres.

5/3/05

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

Please waive the 400.00
Fee since I did not get form
until 5/3/05

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PST
NAME ROCCO, PAUL
STREET ADDRESS 13549 BRIGHTSTONE ST
CITY-ST-ZIP WEST PALM BEACH FL 33414 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST
NAME Paul Rocco
STREET ADDRESS 2159 Polo Gardens Dr. Apt. 103
CITY-ST-ZIP Wellington, FL 33414 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Paul Rocco

Paul Rocco

Pres.

5/3/05

561-351-1187

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #