

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080620

Entity Name: CASINO LIMO CORP.

FILED  
Jan 11, 2007  
Secretary of State

## Current Principal Place of Business:

1 SEMINOLE WAY  
HOLLYWOOD, FL 33024

## New Principal Place of Business:

1103 NW 131ST. AVE.  
PEMBROKE PINES, FL 33028

## Current Mailing Address:

PO BOX 17825  
PLANTATION, FL 33318

## New Mailing Address:

FEI Number: 86-1106227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARDAR, ANDREW R  
1103 NW 131 AVE.  
PEMBROKE PINES, FL 33028 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OSCEOLA, MARCELLUS JR  
Address: 6331 N. 40TH. ST.  
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP ( ) Delete  
Name: BARDAR, ANDREW R  
Address: 1103 NW 131 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: ANDREW BARDAR

P

01/11/2007

Electronic Signature of Signing Officer or Director

Date