2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000150712

Entity Name: BRIDGE LIMOUSINES CORPORATION

FILED Dec 09, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:				
1703 NE 25TH STREET WILTON MANORS, FL 33305				2851 W PROSPECT RD UNIT #801 FORT LAUDERDALE, FL 33309				
Current Mailing Address:				New Mailing Address:				
1703 NE 25TH STREET WILTON MANORS, FL 33305				2851 W PROSPECT RD UNIT #801 FORT LAUDERDALE, FL 33309				
FEI Number:	57-1220563	FEI Number Applied For ()	FEI Nun	nber Not Appl	licable ()	Certificate	of Status Desired ()	
Name and	Address of C	Surrent Registered Agent:		Name and	Address of N	ew Regis	tered Agent:	
1703 NE 25TH STREET 28					TORRES, JOHANN 2851 W PROSPECT RD FORT LAUDERDALE, FL 33309 US			
The above r in the State	named entity s of Florida.	submits this statement for the po	urpose o	f changing i	ts registered of	fice or reg	gistered agent, or both,	
SIGNATURE: JOHANNS TORRES				12/09/2008				
Electronic Signature of Registered Agent					Date			
		3(2)(b), F.S., the corporation did not	receive t	he prior notic	e.			
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	MEDINA, LUZ N 1455 HOLLY HI	Delete 1 EIGHTS DRIVE APT. 1 DALE, FL 33304		Title: Name: Address: City-St-Zip:	()	Change()	Addition	
Title: Name: Address: City-St-Zip:	TORRES, HARO 1455 HOLLY HI	Delete DLD EIGHTS DRIVE APT. 1 DALE, FL 33304		Title: Name: Address: City-St-Zip:	O (X) TORRES, JOHA 2851W PROSPI FORT LAUDERI	ECT RD		
Title: Name: Address: City-St-Zip:	PD () TORRES, JOHA 1703 NE 25TH WILTON MANO	STREET		Title: Name: Address: City-St-Zip:	()	Change()	Addition	
Title: Name: Address: City-St-Zip:	TORRES, VANN 1455 HOLLY HI	Delete IESSA EIGHTS DRIVE APT 1 DALE, FL 33304		Title: Name: Address: City-St-Zip:	()	Change()	Addition	
Title: Name: Address: City-St-Zip:	TORRES, EVY 1455 HOLLY HI	Delete EIGHTS DRIVE APT 1 DALE, FL 33304		Title: Name: Address: City-St-Zip:	()	Change()	Addition	

I hereby certify that the information supplied with this filing does not qualify 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: JOHANNS TORRES P 12/09/2008