

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051689

Entity Name: MY CHAUFFEUR INC

FILED  
Apr 28, 2006  
Secretary of State

**Current Principal Place of Business:**

4970 SW 52ND STREET  
BAY 314  
DAVIE, FL 33314 US

**New Principal Place of Business:**

**Current Mailing Address:**

4970 SW 52ND STREET  
BAY 314  
DAVIE, FL 33314 US

**New Mailing Address:**

4980 SW 52ND STREET  
BAY 119  
DAVIE, FL 33314 US

FEI Number: 20-2671478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SEARLES, GARY  
4970 SW 52ND STREET  
BAY 314  
DAVIE, FL 33314 US

**Name and Address of New Registered Agent:**

SEARLES, GARY  
4980 SW 52ND STREET  
BAY 119  
DAVIE, FL 33314 US

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: GARY SEARLES

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SEARLES, GARY  
Address: 1302 N  
City-St-Zip: LAKE WORTH, FL 33460 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: GARY SEARLES

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date