

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000115165

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** PAPA'S LIMOUSINE SERVICE, INC.

**Current Principal Place of Business:**

3201 NE 36 STREET  
#20  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

3201 NE 36 STREET  
#20  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

**FEI Number:** 20-3330776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAGLIANO, DONALD J  
3201 NE 36TH ST  
APT 20  
FORT LAUDERDALE, FL 33308 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: GAGLIANO, DONALD  
Address: 3201 NE 36 STREET, #20  
City-St-Zip: FORT LAUDERDALE, FL 33308

I hereby 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 all other like empowered.

SIGNATURE: DONALD GAGLIANO

PRES

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date