

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000063349

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** GL LIMOUSINE SERVICES, INC.

**Current Principal Place of Business:**

1161 S PARK RD  
306  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

5640 DAWSON ST  
HOLLYWOOD, FL 33023

**Current Mailing Address:**

1161 S PARK RD  
306  
HOLLYWOOD, FL 33021

**New Mailing Address:**

5640 DAWSON ST  
HOLLYWOOD, FL 33023

**FEI Number:** 20-4851431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WAITE, TRACY-ANN  
1161 S PARK RD  
306  
HOLLYWOOD, FL 33021 US

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

WAITE, TRACY-ANN  
5640 DAWSON ST  
HOLLYWOOD, FL 33023 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:

04/27/2012

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WAITE, TRACY-ANN  
Address: 5640 DAWSON ST  
City-St-Zip: HOLLYWOOD, FL 33023

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: TRACY-ANN WAITE

PD

04/27/2012

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

\_\_\_\_\_  
Date