P07000044199

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Recharge News 8-20-08

COVER LETTER

PO: Amendment Section Division of Corporations
SUBJECT: Trim Limousine INC (Name of Corporation)
DOCUMENT NUMBER: P0700044199
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Brent Agin (Name of Contact Person) Trim Limpusine, Inc. (Firm/Company)
(Address) Sufe 102
PALM HAV bor Fl 34684 (City/State and Zip Code)
For further information concerning this matter, please call:
Brent Agin MD at (727) 230-1438 (Name of Contact Person) at (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Trim Limousine Inc
2. The principal office address: 3850 TAMPA Rd Sute 102 PALM Harber, Fl 34684
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/31/2007 Document number: P07080044199
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Don Pierre
3740 Derby Drive # 1109
PALM HArbor F1 34684
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Brent Hain, MD
210) OTTER WAY
PALM HARBON F1 34685 SE
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board of the corporation has been notified in writing of the change.
(Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been perfect in writing of this change.
Simplified Registered Agent) 8/8/08 (Date)
If signing on behalf of an entity:
Trim Limousine Inc (Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)