

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000094147

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** SIGNATURE YELLOW CAB, CORP

**Current Principal Place of Business:**

6208 RIDGE ROAD  
PORT RICHEY, FL 34668

**New Principal Place of Business:**

1422 US HIGHWAY 19  
HOLIDAY, FL 34691

**Current Mailing Address:**

6208 RIDGE ROAD  
PORT RICHEY, FL 34668

**New Mailing Address:**

1422 US HIGHWAY 19  
HOLIDAY, FL 34691

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MARCHETTI, ANTHONY  
6208 RIDGE ROAD  
PORT RICHEY, FL 34668 US

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

MARCHETTI, ANTHONY  
1422 US HIGHWAY 19  
HOLIDAY, FL 34691 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: ANTHONY MARCHETTI

03/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARCHETTI, KIMBERLY  
Address: 3438 HUNTING CREEK LP  
City-St-Zip: NEW PORT RICHEY, FL 34655

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: KIMBERLY MARCHETTI

PRES

03/16/2011

Electronic Signature of Signing Officer or Director

Date