## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Mar 26, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # P9300006138 PREIGN CAR SERVICE, INC.		!	Secre	tary or state	
пазго	REIGH CAR SERVICE, INC.	a company of the second of the				
7501 N.W. 4TH STREET 75 # 112 #		ailing Address 7501 N.W. 4TH STREET # 112 PLANTATION, FL 33317	·	<u> </u>		XXII (1888 ) XXII XXII XXII XXII XXII XXII XXII
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent				02182005 No Chg-P CR2E034 (10/03)  4. FE! Number		
TENREIRO 6306 FLAO HOLLYWO	O, JUAN GLER ST	ici eu Agent			NOT WRI	
	e named entity submits this statement for the tions of registered agent.  Signature, typed or printed name of registered agent and title	- <u></u>	ed office or register	<u> </u>	. <u></u>	am familiar with, and accept
FIL After M	E NOW!!! FEE IS \$150.00 lay 1, 2005 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.		00 May Bo ad to Fees	U00000278	
10.	OFFICERS AND DIRE	CTORS			03/26/05-800	U6-U25 I5U.UU
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TENREIRO, JUAN 6306 FLAGLER STREET HOLLYWOOD, FL 33023	· · · · · · · · · · · · · · · · · · ·	<u></u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POZZOLI, HECTOR HUGO 2547 S.W. 4TH STREET MIAMI, FL 33135			<u></u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		_ DO I	NOT WRI	TE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			 	IN T	HIS SPAC	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP					. ——	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					age ( . market all late and declare a	
of the cor	certify that the information supplied with this fi on this report or supplemental report is true in reporation or the receiver or trustee empowers or on an attachment with an address with all	d to execute this report as required to their like empowered.	mption stated in Sec ure shall have the s ed by Chapter 607	, riorida Statutes,	and that my name appe	r certify that the information . at I am an officer or director ars in Block 10 or Block 11 if
SIGNAT	URE SIGNATURE AND TYPED OR PRINTED	NAME OF SIGNING OFFICER OR DIRECT	OR	36	6-05 Date	Daytime Phone #