

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 25 AM 11:18

DOCUMENT # P94000005583 (7)
1. Corporation Name
FIFTH AVENUE LIMOUSINE, INC.

Principal Place of Business: 3457 AMBASSADOR AVE, SPRING HILL, FL 34609
Mailing Address: 3457 AMBASSADOR AVE, SPRING HILL, FL 34609

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/14/1994		3a. Date of Last Report	
4. FEI Number 59-3220871		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		<input type="checkbox"/> \$5.00 May Be Added to Fees	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 8144 EARLESHIRE LANE Suite, Apt. #, etc.		2a. Mailing Address 26 8144 EARLESHIRE LANE Suite, Apt. #, etc.	
22 City & State 23 SPRING HILL FL		27 City & State 28 SPRING HILL FL	
24 ZIP 34606 Country USA		29 ZIP 34606 Country USA	

9. Name and Address of Current Registered Agent: GROESBECK, PAUL J, 3457 AMBASSADOR AVE, SPRING HILL FL 34609

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature (print or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when certifying)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GROESBECK, PAUL J	1.2 NAME	
STREET ADDRESS	3457 AMBASSADOR AVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL 34609	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GROESBECK, NORMAN	2.2 NAME	
STREET ADDRESS	3457 AMBASSADOR AVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL 34609	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GROESBECK, ELLEN	3.2 NAME	
STREET ADDRESS	3457 AMBASSADOR AVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL 34609	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or 13 or that changed, or on an attachment with an address.

SIGNATURE: Paul J Groesbeck 5-18-95 904.686.8030
PRINT NAME AND TITLE OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone #)