

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Apr 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P94000036640**

1. Entity Name  
**TROLLEY TOURS, INC.**



Principal Place of Business

**998 S MILITARY TR  
DEERFIELD BEACH, FL 33442 US**

Mailing Address

**998 S MILITARY TR  
DEERFIELD BEACH, FL 33442 US**



01102006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**16-1036616**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PEREZ, JOSEPH D.  
5326 FLAMINGO COURT  
COCONUT CREEK, FL 33073**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VT
NAME	PEREZ, DARCY
STREET ADDRESS	4500 NW 12TH DR.
CITY-ST-ZIP	POMPANO BEACH, FL 33073
TITLE	DP
NAME	PEREZ, JOSEPH D
STREET ADDRESS	5326 FLAMINGO COURT
CITY-ST-ZIP	COCONUT CREEK, FL 33073
TITLE	S
NAME	PEREZ, JOSEPH JR
STREET ADDRESS	4771 NW 13TH AVENUE
CITY-ST-ZIP	POMPANO BEACH, FL 33064
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/09/06-80083-022 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Darcy Perez* *Darcy Perez* *4/10/07* *954-429-3100*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #