2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 21, 2005 8:00 am **Secretary of State DOCUMENT # P94000086611** 03-21-2005 90112 040 ***150.00 1. Entity Name TAVERNIER TAXI, INC. Principal Place of Business Mailing Address TONCANOT FLORIDA KEYS 163 COCOA DRIVE 163 COCOA DRIVE TAVERNIER, FL 33070 TAVERNIER, FL 33070 US 03142005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 14-2422673 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CZETTO, PAUL DO NOT WRITE 163 COCOA DRIVE TAVERNIER, FL 33070 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 reinstation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE CZETTO, PAUL NAME STREET ADDRESS 163 COCOA DRIVE CITY-ST-ZIP TAVERNIER, FL 33070 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED