FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500006829 (2)

TOWNCAR TRANSPORTATION, INC.

8177 GLADES RD. 8177 GLADES RD. SUITE 212-214 SUITE 212-214 **BOCA RATON FL 33434 BOCA RATON FL 33434-4071** 3a. Date of Last Report 3. Date incorporated or Qualified 01/26/1995 05/01/1996 2. Principal Place of Business Mailing Address 4, FEI Number Applied For 2a. 65-0603560 26 Not Applicable 21 Suite Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country This corporation has liability for intangible tax under s. 199.032, Zip Country Ζφ Florida Statutes Yes 🔲 No 24 30 25 29 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name BROWNER, JULIUS H ESQ 938 NORTHEAST 62ND STREET Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33334 83 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. 12 Addition DELETE 1.1 TITLE Change TITLE ROSENTHAL, ROCHELLE G 1.2 NAME NAME 4110 N.W. 29TH WAY STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33434** 1.4 CITY-ST-ZIP CHY-ST-ZIP Change Addition TITLE DELETE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST- ZIP CITY-ST-2IP Addition DELETE ☐ Change THILE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP COY-ST-ZIP DELETE Change ■ Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIF

14. I do 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 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 Block 13 if changed, or on an attachment with an address.

51 TITLE

5.2 NAME

6.1 TITLE

62 NAME

5 3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CiTY - ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAMÉ STREET ADDRESS

STREET ADDRESS

CITY-SI-ZIP

CITY ST-ZiP

POSITION OFFICER OF DIRECTOR

DELETE

DELETE

3.31-97

Daytime Prkine #

Change

Change

Addition

Addition

FILED

Apr 04 1997 8:00am

Secretary of State