

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000065784 (7)

1. Corporation Name

A LOHA LIMOUSINE AND TRANSPORTATION SERVICE, IN
C.



Principal Place of Business

3104 SE 15TH PLACE
CAPE CORAL FL 33904

Mailing Address

3104 SE 15TH PLACE
CAPE CORAL FL 33904

2. Principal Place of Business

21 1306 S.E. 16TH ST.

Suite, Apt. #, etc.

22 City & State

23 Cape Coral Fl.

24 Zip 33990 Country Lee

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27 1306 SE 16TH ST.

28 Cape Coral Fl.

29 Zip 33990 Country Lee

3. Date Incorporated or Qualified

08/24/1995

3a. Date of Last Report

First Report.

4. FEI Number

65-0533301

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PATTON, DONALD
3104 SE 15TH PLACE
CAPE CORAL FL 33904

10. Name and Address of New Registered Agent

81 Name

PATTON, DONALD W.

82 Street Address (P.O. Box Number is Not Acceptable)

1306 SE 16TH ST

83

84 City

Cape Coral

FL

85 Zip Code

33990

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 Donald W. Patton

Signature, typed or printed name of registered agent, and office if applicable

Donald W. Patton

(NOTE: Registered Agent signature required when reinstating)

2/6/96

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME PATTON, DONALD
STREET ADDRESS 3104 SE 15TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE PATTON BARBARA ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PATTON DONALD P ☐ Change ☐ Addition

12 NAME 1306 SE 16TH ST
13 STREET ADDRESS CAPE CORAL FL 33990.

14 CITY-ST-ZIP

2.1 TITLE PATTON BARBARA ☐ Change ☐ Addition

22 NAME 1306 SE 16TH ST V/S/T
23 STREET ADDRESS CAPE CORAL FL 33990

24 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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)(k), 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.

SIGNATURE: DONALD W. PATTON Donald W. Patton 02/06/96 (941) 574-7070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)