2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P95000065784 1. Entity Name A ALOHA LIMOUSINE AND TRANSPORTATION SERVICE, IN						FILED May 16, 2000 8:00 am Secretary of State		
					_	05-16-200	0 90025 022 ***	150.00
Principal Place of Business 1306 SE 16THS ST CAPE CORAL FL 33990 US		Mailing Address 1306 SE 16TH ST. CAPE CORAL FL 33990-3733 US			1			
2. Principal Place of Business		3. Mailing Address			_	DO NOT WRITE IN THIS SPACE		
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
City & State		City & State			4. F	El Number 65-053330	I	Applied For
Zip Country		Zip C		Country		ertificate of Status Desired	□ \$8.75 A	
	6. Name and Address of Currer	nt Registered Agent				ame and Address of New I	Fee Requ	red
SIGNATURE	pration is eligible to satisfy its Intangit	int and file if applicable.		W. Pra		nstating) 10. Election Campaign Fi	<u>4-26</u> DATE	- <i>ОО</i> .00 мау Ве
-	equirement and elects to do so. ia on back)			epartment of S	itate	Trust Fund Contributio		led to Fees
11. TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PATTON, DONALD	D DIRECTORS	NAMI STRE		AD(	DITIONS/CHANGES TO OF	-ICERS AND DIHECTC	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST Delete PATTON, BARBARA 1306 SE 16TH ST CAPE CORAL FL		NAM	TITLE NAME STREET ADDRESS CITY-ST-ZIP			🗋 Chang	e Addition C
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	······································	1		<b>_</b> ~	Chang	e 🗌 Addition }
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	NAM				🗋 Chang	e 🗌 Addition
indicated	certify that the information supplied w on this report or supplemental repor poration or the receiver or trustee err or on an attachmen with an address FURE:	t is true and accurate and powered to execute this	that my signal report as requir wered.	ture shall have the terms of terms	Section 1 he same li 607, Florid	19.07(3)(i), Florida Statutes. egal effect as if made under da Statutes; and that my nan PATION Date	I further certify that th oath; that I am an offic he appears in Block 11 4-26- Daytime Phone	or Block 12 if