2005 FOR PROFIT CORPORATION **ANNUAL REPORT** DOCUMENT # P96000013688 ALOHA LIMO SERVICE, INC. Principal Place of Business Mailing Address 5400 NORTHWEST TENTH TERRACE 5400 NORTHWEST TENTH TERRACE FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 DO NOT WRITE IN THIS SPACE

FILED Jul 27, 2005 8:00 am Secretary of State

07-27-2005 90046 011 ***150.00

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07062005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0646674

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

E SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOLAN, JAMES V 1040 BAYVIEW DRIVE #606 FORT LAUDERDALE, FL 33304

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

SIGNATURESignature, 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 Due by September 7, 2005 9. Election Campaign Finan Trust Fund Contribution.		ng 🗆	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS				***	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	P BARRY, JAMES E 5400 NORTHWEST TENTH TERRACE FORT LAUDERDALE, FL 33309				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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TITLE NAME STREET ADDRESS CITY-SI-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.					

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

June 29, 2005

ATTACHMENT SOOS7875

Division of Corporation PO BOX 6198 Tallahassee, FI 35314-6198

Document #**6**08724 #P01000028780 #P97000041926

#P96000013688

We received the Notice of Dissolution on these (4) corporations today. We did not receive any prior notice and are asking for you to waive any late or penalty fees involved. Please send us the forms by mail and we will remit as soon as they are received. If you have any questions, please do not hesitate to call.

Sincerely,

James Barry
President