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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000028141 (5)

PRESTIGE LIMOUSINE SERVICES, INC.

Principal Place of Business

Mailing Address

FILED Apr 23 1998 8:00am Secretary of State



314 PENNSYLVANIA AVENUE CRYSTAL BEACH FL 34681				314 PENNSYLVANIA AVENUE CRYSTAL BEACH FL 34681									
diffile pendi in also.				• · · · • · · · · · · · · · · · · · · ·					DO NOT WRITE IN THIS SPACE				
								;	3,	Date Incorporated or Qu 03/25/1996	alified		
2. Principal Place of Business				2a. Mailing Address					4,	FEI Number		A	pplied For
21				26						59-3373170		N	lot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					Certificate of Status Desired Section				
City & State				City & State					6.	Election Campaign Finar		\$5.00	May Be
23				28						Trust Fund Contribution			l to Fees
Zip	Country			Zip Country				1		This corporation owes or			
24		25	29 30 30 Greent Registered Agent						Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
			Current Regi	stered Agent		81	Name		IU.	Mante and Address of t	low negistered	Agent	
	LLWEG, JA		ı -										
314 PE NNSYLVANIA AVENUE CRYSTAL BEACH FL 34681						82	82 Street Addr		(P.	O. Box Number is Not A	cceptable)		
						83				· · · · · · · · · · · · · · · · · · ·			
						84	City				<u> </u>	85 Zip	Code
							,				FL	, `	
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	for printed name of re-	estered agent and til	le il applicable (NO	TE: Registere	d Age	ent signature	w beniupos e	vhen e	re-nstating)	DATE		
12,			ERS AND DIRE		13.		-		Α	ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTO	RS IN 12
TITLE	D			DELETE	1.1 1	TLE						Change	☐ Addition
NAME	BALLWI	EG, JAMES E	H		1.2 N	AME		1					
STREET ADDRESS	314 PE	NNSYLVANIA /	VENUE		1.3 S	TREET	ADDRESS						
CITY-ST-ZIP	CRYSTA	AL BEACH FL	34681		1.4 C	ITY-S	T-ZIP						
TITLE				☐ DELETE	2.1 TI	TLE		Ī				Change	☐ Addition
NAME					2.2 N	AME							
STREET ADDRESS					2.3 S	TREET	ADDRESS						
CITY-ST-ZIP					2.40	ITY-S	ST-ZIP						
TITLE				☐ DELETE	3.1 Ti	TLE						Change	☐ Addition
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CITY - ST - ZIP					3.4. 0	ITY-S	ST - ZIP						
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NAME					4.21	IAM E		1					
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CITY-ST-ZIP							T-ZIP	ļ					- 1
TITLE				☐ DELETE	5.1 T	TLE						□ Change	Addition
NAME					5.2 N								
STREET ADDRESS					5.3 S	TREET	ADDRESS						
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TITLE				☐ DELETE	6.1 T								L. Addition
NAME					6.2 N								
STREET ADDRESS					6.3 S	TREET	ADDRESS						
CITY+ST-ZIP	L		,				1-ZIP	<u> </u>		- 440 07/0V// FI			a Information
indicated officer or	14. 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 annual roport 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.												