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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business

C:TY - ST - ZIF

appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

POCUMENT # P96000059285 (2)

ACTION LIMOUSINE AND AIRPORT SERVICE, INC.

1265 N.W. 110TH AVE. 1265 N.W. 110TH AVE. PLANTATION FL 33322 PLANTATION FL 33322-6933 3. Date Incorporated or Qualified 3a. Date of Last Report 07/15/1996 2. Principal Place of Business 2e. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Country Zio This corporation has liability for intangible tax under s. 199.032, 30 Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name WELP, MARK 1265 N.W. 110TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33322** 83 84 City **B**5 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: typical 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 13. 12. (96/6) DELETE 11 TITLE Change Addition TIT, F WELP, MARK NAME 1.2 NAME 1265 N.W. 110TH AVE. 1.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 33322 1.4 CITY-ST-ZIP DELETE Change Addition THE 2.1 TITLE THOMAS, JAY NAME 2.2 NAME 1265 N.W. 110TH AVE. STREET ADDRESS 2.3 STREET ADDRESS **PLANTATION FL 33322** 2. 4 CITY - ST-ZIP City - \$1 - 7(P) DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - 7IP DELETE ☐ Change Addition TILLE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP DELETE Addition THE 5.1 TITLE 5 2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP C-TY ST- ZIF □ DELETE 61 TITLE 700002188937 -05/22/97--01124--043 ***165.00 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

14. To 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 12 or no anxiety chapter 607.