
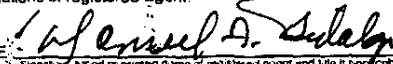



**FILED**  
**Aug 20, 2003 8:00 am**  
**Secretary of State**

07-16-2003 90045 020 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT #</b> P96000059427 	
<b>1. Entity Name</b> ORLANDO MIAMI SHUTTLE SERVICES, INC.	
<b>DO NOT WRITE IN THIS SPACE</b>	
<b>2. Principal Place of Business</b> 11771 SW 27 Street Suite, Apt. #, etc.	<b>3. Mailing Address</b> 11771 SW 27 Street Suite, Apt. #, etc.
<b>City &amp; State</b> Miami, FL	<b>City &amp; State</b> Miami, FL
<b>4. FEI Number</b> 65-0795018	<b>Applied For</b> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> Name: Manuel Hidalgo Street Address (P.O. Box Number is Not Acceptable): 11771 SW 27 Street City: Miami FL Zip Code: 33175	
<b>7. 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 the obligations of registered agent.</b>	
<b>SIGNATURE:</b>  <small>(NOTE: Registered Agent signature required when re-registering)</small> <b>DATE:</b>	
<b>8. January 1 - May 1 Fee is \$150.00</b> <b>After May 1 Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Florida Department of State.</b>	
<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP
President Hidalgo, Manuel A 11771 SW 27 Street Miami, FL 33175	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP
Vice-President Hidalgo, Marisol R 11771 SW 27 Street Miami, FL 33175	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP
	<b>DO NOT WRITE IN THIS SPACE</b>
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP
<b>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 on an attachment with an address, with all other like empowered.</b>	
<b>SIGNATURE:</b>  <b>(305) 559-5829</b>	

CR2E034B (12/02)

Attachment

55054581

P96000059427

July 10, 2003

Honorable Glenda E. Hood, Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Honorable Secretary of State:

RE: 2002 Uniform Business Report (UBR) P96000059427

Orlando Miami Shuttle Services, Inc. did not file the 2003 Uniform Business Report. We found out about this problem when our CPA calls us, while verifying our records, and was reconciling the bank account. He downloaded the form through the Internet, and gave it to us so that we sign it. Therefore, we send a check for \$ 150.00 to cover the fees.

Last year we had the same problem. There has to be a problem with the address. Our address is:

11771 SW 27 Street.  
Miami, Florida 33175-2410-716.

We will appreciate your assistance to this matter and are sorry that this happened

Very truly yours,

  
Orlando-Miami Shuttle Services, Inc.

Cc: File