


Jul 01 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

Jul 01 1998 8:00am
Secretary of State

DOCUMENT # P 96000076221
1. Corporation Name
JC's LIMO SERVICE, INC.

Principal Place of Business
330 N. FEDERAL HIGHWAY
SUITE # 209
DEERFIELD BEACH, FL 33441

Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
9/13/96

4. FEI Number
65-0699370

5. Certificate of Status Desired
8. Election Campaign Financing
Trust Fund Contribution
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Applied For
Not Applicable
\$8.75 Additional
Fee Required
\$5.00 May Be
Added to Fees
Yes No

9. Name and Address of Current Registered Agent
JOSE SOCARRAS
330 N. FEDERAL HIGHWAY
SUITE # 209
DEERFIELD BEACH, FL 33441

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY- ST- ZIP
PRESIDENT JOSE SOCARRAS 330 N. FEDERAL HIGHWAY #209 DEERFIELD BEACH, FL 33441
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST- ZIP
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST- ZIP
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST- ZIP

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 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 13 if changed, or on an attachment with an address.

SIGNATURE X Jose Socarras X 6/24/98 X 954-426-8735
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Craig Sharet, C.P.A., P.A.

300 South Pine Island Road

Suite # 204

Plantation, FL 33324

(954) 423-4050

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June 24, 1998

**Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

**Re: J.C.'s Limo Service, Inc.
330 North Federal Highway
Suite # 209
Deerfield Beach, FL 33441**

Document #: 96000076221

To whom it may concern:

We are filing our 1998 Profit Corporation Annual Report at this time. We are filing using a blank form, rather than the original preprinted form that was supposed to be received by us earlier in the year, because we never received the original form.

We have enclosed the original filing fee of \$ 150. We respectfully request that you waive the late filing penalty since we never did receive that original form. As soon as we realized the report was not filed we filed this blank form accordingly.

Thank you very much for your attention to this matter.

Very truly yours,

C Sharet, CPA

Craig Sharet, C.P.A.

Acknowledged,

Jose Socarras

Jose Socarras, President