

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

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000014298

1. Corporation Name

New Star Limousine Corp.

Principal Place of Business

Mailing Address

1059 Collins Avenue - suite 203
Miami Beach, FL 33129

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Feb 13, 1997

4. FEI Number

65-0727112

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☒

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

Alberto Nieves
8551 NW 51st
Lauderhill, FL 33351

10. Name and Address of New Registered Agent

81 Name

Carmen Nieves

82 Street Address (P.O. Box Number is Not Acceptable)

8551 NW 51st

83

84 City

Lauderhill

FL

85 Zip Code

33351

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: *Carmen Nieves*

Signature typed or printed name of registered agent and date of appointment

(NOTE: Registered Agent Signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME albert Nieves
STREET ADDRESS 8551 NW 51st
CITY-ST-ZIP Laudershill, FL 33351 ☒ DELETE

TITLE S
NAME Celia Nieves
STREET ADDRESS 8551 NW 51st
CITY-ST-ZIP Laudershill, FL 33351 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME Carmen Nieves ☒ Change ☐ Addition
1.3 STREET ADDRESS 8551 NW 51st
1.4 CITY-ST-ZIP Laudershill, FL 33351

2.1 TITLE S
2.2 NAME Marla Gonzalez ☒ Change ☐ Addition
2.3 STREET ADDRESS 8551 NW 51st
2.4 CITY-ST-ZIP Laudershill, FL 33351

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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: *Carmen Nieves*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

000002425220
-02/09/98--01043--015
***150.00

2/3/98

(954)747-0918

CR2E034 (10/97)