

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000044275

FILED  
Apr 22, 2008  
Secretary of State

Entity Name: VILLAGE CAR SERVICE II, INC.

## Current Principal Place of Business:

245 S. FEDERAL HWY.  
DANIA, FL 33004

## New Principal Place of Business:

3383 SW 11 AVENUE  
FORT LAUDERDALE, FL 33315

## Current Mailing Address:

245 S. FEDERAL HWY.  
DANIA, FL 33004

## New Mailing Address:

3383 SW 11 AVENUE  
FORT LAUDERDALE, FL 33315

FEI Number: 65-0760513

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VARONE, PASQUALE M  
245 S. FEDERAL HWY  
DANIA, FL 33004 US

## Name and Address of New Registered Agent:

VARONE, PASQUALE M  
3383 SW 11 AVENUE  
FORT LAUDERDALE, FL 33315 US

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.

SIGNATURE:

04/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SCHUHMANN, KRISTEN  
Address: 245 S. FEDERAL HWY.  
City-St-Zip: DANIA, FL 33004

Title: D ( ) Delete  
Name: JAROSZ, LEONA  
Address: 245 S. FEDERAL HWY.  
City-St-Zip: DANIA, FL 33004

Title: P ( ) Delete  
Name: VARONE, BARBARA A  
Address: 245 S. FEDERAL HWY.  
City-St-Zip: DANIA, FL 33004

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SCHUHMANN, KRISTEN  
Address: 3383 SW 11 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: D (X) Change ( ) Addition  
Name: JAROSZ, LEONA  
Address: 3383 SW 11 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: P (X) Change ( ) Addition  
Name: VARONE, BARBARA A  
Address: 3383 SW 11 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33315

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA VARONE

PRES

04/22/2008

Electronic Signature of Signing Officer or Director

Date