2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

09-20-2004 90004 030 *** 150:00 P97000045234 LILLETARY OF STATE DOCUMENT # P97000045234 . ISION OF CORPORATION 1. Entity Name THE QUEEN'S LIMO, INCORPORATED. 04 SEP 29 PM 2: 06 Principal Place of Business Mailing Address P O BOX 1341 CLEARWATER FL 33757 PO BOX 1341 CLEARWATER FL 33757 Principal Place of Business 3. Mailing Address Po Box PO BOX 1341 Suite, Apt. #, etc. Suite. Apt. #, etc. CR2E034 (4/04) City & State FLORIDA Clion wat FEi Number Applied For NO-T APPLICABLE FLORIDA Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Charuston Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MANTILLA, GLENDYS F Street Address (P.O. Box Number is Not Acceptable) 115 S. LAKE DRIVE **CLEARWATER FL 34615** City Zio Code 8. 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 \$5.00 May Be 9. Election Campaign Financing DUE BY September 8, 2004. late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees did not receive prior notice. Fee to file is \$150.00. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. me Delete TITLE Addition applicable MANTILLA, GLENDYS F NAME NAME 115 S. LAKE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 34615 CITY-ST-ZIP ☐ Change TITLE ☐ Delete ☐ Addition TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS No CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITL F Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-70P ☐ Delete TITLE ☐ Channe Milibha M NAME STREET ADDRESS STREET ADDRESS NΑ NR CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change TITLE Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 Block 11 if changed, or on an attachment with an address

Glendys Mantifua

SIGNATURE:

Sept. 30, 2004 Florida Deportment of Subject: The Overn's L'mo, Truc Red: # P970000 45234 APTN: EU14. (FAX#(850-2456017

To whom it may covern:

I never received the 1st votice of the corp.

Form: I only received the 2nd notice in the end of signst. However, I have paid the \$150 one

Sept 1st (Lebek # 2633) which has eleared in my bout. Phase notice the necessary correction that all resads are up to dale. Those contact me @ 727-446 1222 if, you have any questions.



Thank you