


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
7/ Aug 06, 2008 8:00 am
Secretary of State

07-11-2008 90018 048 ***158.75

DOCUMENT # P97000049865	
1. Entity Name SOVEREIGN COACH AND TOUR, INC.	

Principal Place of Business 4160 RAVENSWOOD ROAD FORT LAUDERDALE, FL 33312	Mailing Address 4160 RAVENSWOOD ROAD FORT LAUDERDALE, FL 33312
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66015769



07072008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0816115	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MAHMOUD, SAAD A 5925 N BAY SHORE DR MIAMI, FL 33137

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAHMOUD, SAAD A 5925 N BAY SHORE DR MIAMI, FL 33137
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, with all other like empowered.

SIGNATURE:  **8/11/08** **954-522-1516**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #