5/22

FILED
Jul 19, 2001 8:00 am
Secretary of State
05-22-2001 90029 018 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000043425

1. Entity Name
In Style limousine D.B.A. : FanTasy Limo (LA)

Principal Place of Business
2800 N. MiliTary Trl
West Palm Bch, Fla.
33409

Mailing Address
FanTasy Limo
P.O. Box 222283
W.P.B. Fla 33422

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2800 N Military	
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. Box 222283
City & State: W P B	City & State: W.P.B. Fla
Zip: 33409 Country: Palm Bch	Zip: 33422 Country: Palm Bch

4. FEI Number 65-0835887 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Jose AnThony. Figueroa
1108 G3 Greenpine Blvd
West Palm Bch, Fla 33409
561-640-3308

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip 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.

SIGNATURE [signature] 4-27-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT JOSE A. FIGUEROA 1108-G3 GREENPINE BLVD WEST PALM BEACH FL-33409 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (11/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jose A Figueroa 6-11-01 561 714-6010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
Doc# P98000043425
7/6/96

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 20, 2001

IN-STYLE LIMOUSINE, INC.
P.O. BOX 222283
W.P.B., FL 33422

Subject: **IN-STYLE LIMOUSINE, INC.**

Reference Number: **P98000043425**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling $150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

List the complete title, name, street address, city, state and zip code of each officer/director of the corporation.

TO AVOID THE $400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/SG
ANNUAL REPORTS SECTION