FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P98000070011 **DOCUMENT #**

1. Entity Name



1. Entity Name FLORIDA VALET PARKING SERVICE, INC.									O3 FEB 10 PH12: 55		
Principal Place of Business 602 GREEN SPRING WEST PALM BEACH FL 33409 US				Mailing Address PO BOX 222134 W PALM BCH FL 33422 US					SECRETARY OF STATE FALLAFIASSEE. FLORIDA		
2. Principal Place of Business				3. Mailing Address							
Suite, Apt			Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES			
City & State			City & State				4. FE	Number 65-0855248	 	pplied For ot Applicable	
Zip	Country				Count	ntry 5			ertificate of Status Desired	\$8.75 Ad Fee Require	
	ed Agent				7. Na	me and Address of New Register	red Agent				
KAVEKOS, JOHN P 602 GREEN SPRINGS PLACE WEST PALM BEACH FL 33409						Street A		EI	KOS, ANA Number is Not Acceptable) EEN SPEN	M	ACE
SIGNATURE F	Signature, Types FILE NOW!! r May 1, 200	y submits this statement for ered agent a printed name of registered agent a PEE IS \$150.00 3 Fee will be \$550.00 9 Florida Department of	nd title if app	&s_	 	1 <u>A</u>	r registere	Ń.	9. Election Campaign Financing Trust Fund Contribution.	ме \$5.0	and accept May Be d to Fees
10.		OFFICERS AND D	DIRECTO	RS	11.			ADDI	ITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11
TITLE NAME				☐ Delete	TITLE NAME STREE	T ADDRESS ST-ZIP		VE	KOS ANA H. REEN SPRING 3.121 334	© Change	☐ Addition
STREET ADDRESS	WEST PALA	ANA SPRINGS PLACE 1 BEACH FL 33409	. 100	□ Delete	TITLE NAME STREE CITY-:	T ADDRESS ST-ZIP	603	ک_ آحد	KOS JOHN FREEN SPLING PALN BEACH	Change	Addition
CITY-ST-ZIP		ICHARD SPRINGS PLACE 1 BEACH FL 33409		☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS ST-ZIP	: . -		000011990 6 2/07/0301078006	` ☐ Channa	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-45			☐ Delete	TITLE NAME STREET CITY-5	FADDRESS ST-ZIP				Change	☐ Addition
TITLE NAME STREET AODRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP				Change	☐ Addition
TITLE Name Street address City-St-Zip				☐ Delete	TITLE NAME STREET CITY-S	ADDRESS (T-ZIP				☐ Change	Addition

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 attantment with an address, with all other like empowered.

SIGNATURE: