## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT ...

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State / DIVISION OF CORPORATIONS FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90118 001 \*\*\*150.00

## DOCUMENT # P98000077059

AVENUE LUXURY LIMOUSINES, INC.

Principal Place of Business

ATO NW 48TH CT.

SIGNATURE:

Mailing Address

5710 NW 48TH CT



SPRINGS FL 33067		CORAL SPRINGS FL 33067			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed 08/31/1998 .				
Principal Place of Business	· 2a. Mailing Add	2a. Mailing Address			4. FEI Number		Applied For		
1	26				65-0862504	L	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. i	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> May Be Added to Fees			
Zip Country	Zip 29	Zip Country			This corporation owes the current year Int Personal Property Tax.	angible Ye:			
9 Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
CORTESE, CHARLES			81	Name					
5710 NW 48TH CT.			82	Street Address (P.O. Box Number is Not Acceptable)					
CORAL SPRINGS FL 33067									
			84	City	FL	85	Zip Code		

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

·	•					
SIGNATURE	Signature, typed or printed name of registered agent and title if applic	able (NOTE: B	egistered Agent signature required	d when (einstaling)	DATÉ	
12.	OFFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Change	Addition
NAME	MARTIN, DENNIS		1,2 NAME			
STREET ADDRESS	11042 ROYAL PALM BLVD.		1.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE .	2.1 TITLE		Change	Addition
NAME	CORTESE, CHARLES		2.2 NAME			
STREET ADDRESS	5710 NW 48TH CT.		2.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33067		2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME	•		4, 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP	·		4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
	and the that the information according with this filing of	lana and amakin for t	La constant de C	Santian 410 07(0)(i) Florida Chatutan 1 five	alaaa aadif dhaa idaa idaa id	formation

I necess ceruly that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or an attachment with an address, with all other like empowered.