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PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name



DOCUMENT # P98000085032

FLORIDA DEPARTMENT OF STATE

Apr 12, 1999 8:00 am Secretary of State **Katherine Harris** Secretary of State **DIVISION OF CORPORATIONS** 04-12-1999 90023 042 ***150.00

	LIMOUSINE, INC.												
Principal Place	e of Business	Ma	ailing Address					II BBIJI BBJII	BOILL COLOR IS			10 1101 1001	
11505 N.E. 22N	D DRIVE	115	605 N.E. 22ND DRIVE										
	N MIAMI FL 33181 N MIAMI FL 33181				DO NOT WRITE IN THIS SPACE								
							3. Date Incorporated or 0		114 11 115	JI AUL			
	عدرها بمادي عاجويني	بعضاء وسيبي يايين	د سب سر حیث	-	-	-^	10/05/1998						
2. Principal Pi	lace of Business	2a.	Mailing Address				4. FEI Number	<u> </u>			Appli	ed For	
21		26					65-086	<u> 7403</u>	<u>3</u>			Applicable	
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.				5. Certifcate of Status De	esired		\$8.75 Fee	5 Add Requ		
City & State	e		City & State				6. Election Campaign Fit	nancing		\$5.0	00 м	ay Be	
23		28					Trust Fund Contribution	en		Adde	ed to I	Fees	
Zip	Country	у	Zip	Cour	ntry		8. This corporation owes	the curren	ıt year inta		_	.	
24	25	29		30			Personal Property Tax		14 -44	∐Yes		No	
	 Name and Addre 	ess of Current Regis	tered Agent	-	81	Name	10. Name and Address	t New Re	gisterea A	gent			
COL	ANGELO, RICHARD A	.			° '								
t .	05 N.E. 22ND DRIVE	`		[82	Street Add	dress (P.O. Box Number is No	Acceptabl	e)				
	IAMI FL 33181			}	83								
							, <u></u>			11 -			
					84	City			. FL	85 Z	ip Co	de	
11. Pursuant	to the provisions of Sect	tions 607.0502 and 6	07.1508, Florida Statu	tes, the at	ove-	-named cor	poration submits this statemer	t for the pu	rpose of	hanging	its re	gistered	
office or n	egistered agent, or both	, in the State of Florid	da. Such change was a	uthorized	byti ⊪wee	he corporat	tion's board of directors. I here	by accept	rue appoin	unent as	regis	lereo	
			CONTINUE DELL'ADDOC		,								
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SIGNATURE	Sign ture bated or printed name	e of registered agent and title	ir oppicatole . (NO)	Registered	\nearrow	_	red when reinstating)		DATE		1	41	ļ 6
SIGNATURE	Signature based or printed name	THE	in applicable. (NOT	Registered	Agent	_			DATE	D DIREC	TOR	S IN 12	(00)
SIGNATURE 12. TITLE	Signature based or printed name O PD	e of registered agent and title DFFICERS AND DIRE	ir oppicatole . (NO)	13.	Agent	_	red when reinstating)		DATE		TOR	41	100,477
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CITY-ST-ZIP 14. 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 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 on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS