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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # S09092 1. Corporation Name

AAE21 B	OCA LIMOUSINE SERVICE,	· IIVO•							
Principal Place	e of Business	Mailing Addres	ss			- I IMMISTRAM SII MAITA INSII MAI	ICO EDICED MON DIDEN	OIDH GIGH GIBH I	EINEL MINIT LOUI
9110 INDIAN RI	. ,	P.O. BOX 8108	161						
BOYNTON BEACH FL 33437 BOCA RATON FL 33481						DO NOT I	MOITE IN THIS	e edace	
US US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
						10/26/1990	TO V	•	
2 Principal P	lace of Business	2a. Mailing Ad	Idress			4. FEI Number	7-1-	Ap	plied For
21		26				65-0224249	٠.,	No	t Applicable
Suite, Apt.	#; etc	Suite, Apt.	#, etc.			5. Certificate of Status Desire	d □ ,	\$8.75	
22		27				5. Certificate of Status Desire		Fee Re	equired
City & State	le	City & Stat	te			6. Election Campaign Finance	ing 🗇	\$5.00	,
23	<u></u>	28			t.	Trust Fund Contribution		Added	to Fees
Zip	Country	Zip		untry		8. This corporation owes the	current year Ir		₽No
24	25	29	30	1		Personal Property Tax.	nu Ponistoro	☐ Yes	ENO
	9. Name and Address of Curren	nt Registered Agen	11	81	Name	10. Name and Address of Ne	w registered	Agent	
RI O	DIG, GREGORY J								
163	N FEDERAL HWY	300		82	Street Addre	ess (P.O. Box Number is Not Acc	eptable)	4	
	AUDERDALE FL 33305	•		83		· 图 [6 的數據]數 (項	873 C 3. 10°		Vide Alle dal
	2.0021.0.12					13、名為對於		的影響的影	
				84	City	The second secon	FI	` 85 Zip €	Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Flo	orida Statutes, the	above	named corpo	pration submits this statement for	the purpose o	of changing its	registered
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	02 and 607:1508, Flo of Florida: Such char ations of Section 60	orida Statutes, the angé was authorize 07:0505, Florida Sta	above- ed by thatutes.	named corpo he corporation	pration submits this statement for n's board of directors. I hereby a	the purpose o ccept the appo	of changing its pintment as re	registered gistered
agent. La	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	02 and 607:1508, Florida. Such chartions of Section 60	orida Statutes, the ange was authorize 17.0505, Florida Sta	above- ed by the stutes.	-named corpo he corporation	oration submits this statement for n's board of directors. I hereby a		of changing its pintment as re	registered gistered
11. Pursuant office or r agent. I a SIGNATURE	im familiar with, and accept the obligation of t	int and title if applicable.	(NOTE: Registere	ed Agent		when reinstating)	DATE	·	
SIGNATURE 12.	Signature, typed or printed name of registered age OFFICERS AN	nt and title if applicable.	(NOTE: Registere	ed Agent		when reinstating) ADDITIONS/CHANGES TO	DATE	ND DIRECTO	ORS IN 12
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14. 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.

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

FILED

Jan 27, 1999 8:00am

Secretary of State

01-27-1999 90001 038 ***150.00