

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 Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90006 041 ***150.00

DOCUMENT # S40871

1. Corporation Name A & L LIMO CO., INC.

Principal Place of Business

13730 ST. RD. 84 259 DAVIE FL 33325

Mailing Address

2571 JARDIN PL FT. LAUDERDALE FL 33327 US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/25/1991
4. FEI Number 65-0260010 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year intangible Personal Property Tax. Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

D'ELIA, LEONARD 532 BEDFORD AVE FT. LAUDERDALE FL 33326

10. Name and Address of New Registered Agent

81 Name DELIA, Leonard
82 Street Address 2571 JARDIN PL
83
84 City WESTON FL 85 Zip Code 33327

11. 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 file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 11/4/99

12. OFFICERS AND DIRECTORS

Table with columns for Title, Name, Street Address, City-ST-ZIP. Includes entries for D'ELIA, LEONARD and D'ELIA, ANDREA.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with columns for Title, Name, Street Address, City-ST-ZIP and Change/Addition checkboxes.

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.

SIGNATURE: Signature and typed or printed name of signing officer or director. DATE: 11/4/99 DAYTIME PHONE #: 954-384-8617

CR2E034 (11/98)

0006441