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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # \$84270

(5)

AIRPORT LIMOUSINE SERVICE, INC.

Principal Place of Business

Mai

7540 NORTH WEST 5TH STREET #6 FORT LAUDERDALE FL 33317

754 FOF

FILED May 12 1997 8:00am Secretary of State

iling Address	
O NORTH WEST 5TH STREET #6 NT LAUDERDALE FL 33317-1615	
	3. Date Incorporated or Qualified 3a. Date of Last Report

			3. Date Incorporated or Qualified 09/30/1991	05/01/1996	
2. Principal P	lace of Business 2. 2a. Mailing Address		4. FEI Number	Applied For	
a (055	54 NW 13" (+ 26)		65-0441956	Not Applicable	
Sulte, Apt.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	AUDERDALE, FL 28 Cily & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip		Country	8. This corporation has tiability for intangible tax under s. 199.032,		
[24] <u>つつ</u>	3 3 25 29 30		Florida Statutes Yes No		
	9. Name and Address of Current Registered Agent	81 Name (10. Name and Address of New Registered Agent		
	SANTI, ROBERT L.	" KOBERT LESANTI			
	O N.W. 5TH STREET IT LAUDERDALE FL 33317	82 Street Andress (F.O. Flox Number is Not Acceptable) COULT			
		84 Crty	Flavorile	85 Zip Code	
44 Purouset	to the provisions of Sections 607 0502 and 607 1509 Florida Statutas the	no above perced series	oration subgritts this statement for the	/ FL 」 ろうろう	
office or r	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the egistered agent, or both, in the State of Florida. Such change was author m familiar with, and accept the obligations of, Section 607.0505, Florida	ne above-named corp rized by the corporat	ion's board of directors. I hereby accept	the appointment as registered	
agent. I a	m familiar with, and accept the obligations of, Section 607.0505, Florida	Statutes.			
SIGNATURE	Signature, typed of printed name of registered agent and title if applicable (NOTE Reg	istered Agent a gnature require	ed when rejectating)	DATE	
12.		13.	ADDITIONS/CHANGES TO OFFICE	D. 11.E	
TITLE		1.1 TITLE		Change Addition	
NAME	DE SANTI, ROBERT L.	1.2 NAME			
STREET ADDRESS		1.3 STREET ADDRESS	0554 NW 13th T. LAUDERDALE	COURT	
CITY-ST-ZIP		1.4 CHY+ST+ZIP	T. LAUDERDALE	5 FL 33313	
TITLE		21 THLE		Change Addition	
NAME	DESANTI, LOUIS	2 2 NAME			
STREET ADDRESS	7540 NW 5TH STREET	2.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL	2. 4 CITY - S1 - ZIP	•		
TITLE	DELETE	3.1 TOLE		Change Addition	
NAME		3.2 NAME			
STREET ADDRESS		33 STREET ADDRESS			
CITY-S1-ZIP		3.4. CITY - ST - 7/P			
TITLE	☐ DELETE	4.1 TITLE	T.	☐ Change ☐ Addition	
NAME		4. 2 NAME]	
STREET ADDRESS		4.3 STREET ADDRESS		i	
CITY-ST-ZIP		4.4 CITY+ST-ZIP			
TITLE	☐ DETE LE	51 Inle		Change Addition	
NAME		5.2 NAME			
Street address		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 C(TY - S) - Z(P			
TITLE		6.1 NILE		Change Addition	
NAME .		6.2 NAME			
STREET ADDRESS	`	6.3 STREET ADDRESS		ì	
CITY-ST-ZIP		64 CITY-ST-7IP			

14. I do 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.