2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # V07695

1. Entity Name
HIGH SOCIETY CHAUFFEURING CORP.

Principal Place of Business	Mailing Address
3550 GALT OCEAN DR. APT. 305 FT. LAUDERDALE, FL 33308	3550 GALT OCEAN DR. APT. 305 FT. LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE

04272006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0308755
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SOLOMON, HARRIS K.
BRINKLEY MCNERNEY MORGAN & SOLOMON
200 EAST LAS OLAS BLVD., STE. 1800
FT LAUDERDALE, FL 33301

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	GELLER, MARK
STREET ADDRESS	3550 GALT OCEAN DR.,#305
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	DV
NAME	GELLER, CAROL
STREET ADDRESS	5100 N OCEAN BLVD #402
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	S
NAME	GELLER, INEZ
STREET ADDRESS	3550 GALT OCEAN DR.,#305
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000551895
05/13/06-80118-015 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark Geller MARK GELLER PRES 4/27/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #