2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V07695

1. Entity Name

HIGH SOCIETY CHAUFFEURING CORP.



Principal Place of Business

3550 GALT OCEAN DR.

APT. 305 FT. LAUDERDALE, FL 33308 Mailing Address

3550 GALT OCEAN DR.

APT. 305

FT. LAUDERDALE, FL 33308

FILED Apr 30, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

04182007 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

		I								
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	Signature, typed or printed name of registered agent and title	If applicable. (NOTE: Registered	Agent signatur	s required when reinstating)	DATE					
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000748797					
10.	OFFICERS AND DIREC	CTORS			 05/17/07-80083-002-150.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GELLER, MARK 3550 GALT OCEAN DR.,#305 FT LAUDERDALE, FL									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GELLER, CAROL 5100 N OCEAN BLVD #402 FT LAUDERDALE, FL									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GELLER, INEZ 3550 GALT OCEAN DR.,#305 FT LAUDERDALE, FL			DO	NOT WRITE					
TITLE NAME STREET ADDRESS CITY-SI-ZIP				IN	THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP										
TITLE NAME STREET ADDRESS										

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 charged, or on an attachment with an address, with all other like empowered.

_	_		-	-	-	-
SI					_	_
		12	-		м.	

CITY-ST-ZIP

Mark Soller

MARK GELLER

4-20-07

Date

Daytime Phone #