

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90011 021 ***150.00

DOCUMENT # V16784

1. Entity Name

EXOTIC CAR TRANSPORT, INC.



Principal Place of Business

880 MAGUIRE RD
OCOE FL 34761
US

Mailing Address

P.O. BOX 91
OCOE FL 34761
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3107401

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEUNIER, THOMAS R.
2536 WOODHAVEN COURT
ORLANDO FL 32818

Name

Meunier, Jan

Street Address (P.O. Box Number is Not Acceptable)

13502 LAKEWOOD DR.

City

Windermere

FL

Zip Code

34786

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

Jan Meunier

2-6-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004: Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ST ☐ Delete
NAME MEUNIER, THOMAS R
STREET ADDRESS 2536 WOODHAVEN COURT
CITY-ST-ZIP ORLANDO FL

TITLE P ☐ Delete
NAME MEUNIER, JAN K
STREET ADDRESS 2536 WOODHAVEN CT.
CITY-ST-ZIP ORLANDO FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME Thomas R Meunier
STREET ADDRESS 13502 Lake Cawood Dr.
CITY-ST-ZIP Windermere, FL 34786

TITLE P ☒ Change ☐ Addition
NAME Jan K Meunier
STREET ADDRESS 13502 Lake Cawood Dr.
CITY-ST-ZIP Windermere FL 34786

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

Jan Meunier

Jan Meunier

Date

2-6-04

Daytime Phone #

407-654-9949