

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000128978

**Entity Name:** CITY TAXI INC.

**Current Principal Place of Business:**

811 MABRY STREET  
TALLAHASSEE, FL 32304

**Current Mailing Address:**

PO BOX 20014  
TALLAHASSEE, FL 32316

**FEI Number:** 26-1516551

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BENFIELD, RON  
58 SIOUX CIRCLE  
HAVANA, FL 32333 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HOFBAUER, FRANZ  
Address POST OFFICE BOX 20014  
City-State-Zip: TALLAHASSEE FL 32316

Title V  
Name HOFBAUER, LUCIA  
Address 1917 SABRA DR  
City-State-Zip: TALLAHASSEE FL 32303

Title S  
Name HOFBAUER, ERIC  
Address 2840 LITTLE DEAL  
City-State-Zip: TALLAHASSEE FL 32308

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** FRANZ HOFBAUER

**PRESIDENT**

**01/02/2020**

Electronic Signature of Signing Officer/Director Detail

Date