

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000083261

1. Entity Name

MOACAR TRANSPORT INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8150 SW 8 Street

Suite, Apt. #, etc.

No. 107

City & State

Miami FL

Zip

33144

Country

USA

3. Mailing Address

9010 SW 137th Avenue

Suite, Apt. #, etc.

Suite 113

City & State

Miami FL

Zip

33186

Country

USA

4. FEI Number

65-0949386

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

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7. Name and Address of Current Registered Agent

Name

EDGAR CARDONA

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

16541 SW 75 Street

City

Miami

FL

Zip Code

33193

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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.

SIGNATURE

Edgar O. Cardona

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

12-26-02

DATE

FEE IS \$50.00

Make Check Payable to Department of State

DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P

EDGAR CARDONA

16541 SW 75 St.

Miami FL., 33193

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VP

JORGE H. JARAMILLO

615 Cascade Fall Dr.

Weaton, FL., 33327

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Edgar O. Cardona

EDGAR CARDONA

12/27/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

German Pena, P.A.
Tax Advisor

December 26th, 2002

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
REINSTATE DEPARTMENT
P.O. BOS 6327
TALLAHASSEE, FL., 32314

Gentlemen:

Please, use this letter as a request to wave reinstatement fees for the following
Corporation:

MORACAR TRANSPORT INC. Doc No. P99000083261

The corporation form was completed and sent at the end of April 2002, with the check for the annual fee. The checks nor the forms were received/returned, probably because the change of address.

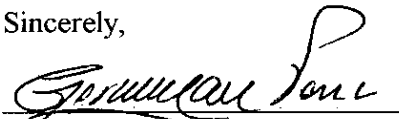
As per our today's telephone conversation, attached to the present note you will find a check for the amount of \$ 150.00 to cover the annual fee for the corporation.

The mailing address for these corporations will be:

9010 S.W. 137th Avenue
Suite 113
Miami, Fl., 33186

Any questions regarding this matter do not hesitate to contact us.

Sincerely,


GERMAN PENA
Director