

2016 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P15000072189

Entity Name: SANCHO HAULING INC**Current Principal Place of Business:**11723 LAKE CLAIR CIRCLE
CLERMONT, FL 34711**Current Mailing Address:**11723 LAKE CLAIR CIRCLE
CLERMONT, FL 34711**FEI Number:** 47-4956921**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SANCHO, SHAMIN
11723 LAKE CLAIR CIRCLE
CLERMONT, FL 34711 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	SANCHO, SHAMIN
Address	11723 LAKE CLAIR CIRCLE
City-State-Zip:	CLERMONT FL 34711

Title	OFFICER
Name	RIVERA GONZALEZ, ANGEL
Address	11723 LAKE CLAIR CIRCLE
City-State-Zip:	CLERMONT FL 34711

Title	OFFICER
Name	SANCHO, SHERMAN
Address	11723 LAKE CLAIR CIRCLE
City-State-Zip:	CLERMONT FL 34711

Title	VP
Name	SANKAR, HARRY N
Address	11723 LAKE CLAIR CIRCLE
City-State-Zip:	CLERMONT FL 34711

Title	OFFICER
Name	SANTIAGO, HENRY
Address	11723 LAKE CLAIR CIRCLE
City-State-Zip:	CLERMONT FL 34711

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: SHAMIN SANCHO**PRESIDENT****06/29/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date