Current Principal Place of Business:
1914 PASSIFLORA LANE
ST. CLOUD, FL 34771

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Mailing Address:

DOCUMENT# P97000046826

Entity Name: MYB TRUCKING, INC.

1914 PASSIFLORA LANE ST. CLOUD. FL 34771

FEI Number: 59-3443463

Name and Address of Current Registered Agent:

BOSTON, MARVIN SR. **1914 PASSIFLORA LANE** ST. CLOUD, FL 34771 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.

MARVIN BOSTON			06/16/2020	
Electronic Signature of Registered Agent			Date	
tor Detail :				
D	Title	D		
BOSTON, MARVIN SR.	Name	BOSTON, YVONNE		
1914 PASSIFLORA LANE	Address	1914 PASSIFLORA LANE		
ST. CLOUD FL 34771	City-State-Zip:	ST. CLOUD FL 34771		
S	Title	OFFICER		
BOSTON, SHAVONE	Name	BOSTON, TERENCE J		
1566 SOFTSHELL STREET	Address	1914 PASSIFLORA LANE		
ST. CLOUD FL 34771	City-State-Zip:	SAINT CLOUD FL 34771		
	MARVIN BOSTON Electronic Signature of Registered Agent tor Detail : D BOSTON, MARVIN SR. 1914 PASSIFLORA LANE ST. CLOUD FL 34771 S BOSTON, SHAVONE 1566 SOFTSHELL STREET	MARVIN BOSTON Electronic Signature of Registered Agent tor Detail : D Title BOSTON, MARVIN SR. Name 1914 PASSIFLORA LANE Address ST. CLOUD FL 34771 City-State-Zip: S Title BOSTON, SHAVONE Name 1566 SOFTSHELL STREET Address	MARVIN BOSTON Electronic Signature of Registered Agent tor Detail : D Title BOSTON, MARVIN SR. 1914 PASSIFLORA LANE ST. CLOUD FL 34771 S Title OFFICER BOSTON, SHAVONE 1566 SOFTSHELL STREET	

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: YVONNE BOSTON

VICE PRESIDENT

06/16/2020 Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No