## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 17, 2000 8:00 am Secretary of State **DOCUMENT # 330428** INTERNATIONAL TRUCKING & RIGGING CO., INC. 04-17-2000 90151 018 \*\*\*150.00 Mailing Address Principal Place of Business 11320 NW 138 ST 11320 NW 138 ST MIAMI FL 33178-3107 MIAMI FL 33178 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. -Suite, Apt. #, etc. -Applied For City & State 4. FEI Number City & State 59-1209709 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KIPP, RICHARD L. SR. Street Address (P.O. Box Number is Not Acceptable) 11320 NW 138 ST **MIAMI FL 33178** Zip Code 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Delete TITLE TITLE KIPP, RICHARD L. SR. NAME NAME STREET ADDRESS 14830 LEWIS RD. STREET ADDRESS 33014 CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL ☐ Change ☐ Delete TITLE KIPP, RICHARD L. JR. NAME NAME STREET ADDRESS 14520 HAMPTON PL. STREET ADDRESS 33325 DAVIE FL CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE TITLE KIPP.ANN NAME NAME 14830 LEWIS RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 33014 CITY-ST-ZIP MIAMI LAKES FL Addition ☐ Change TITLE ☐ Defete TITLE KIPP.ANN NAME NAME 14830 LEWIS RD. STREET ADDRESS STREET ADDRESS 33014 CITY-ST-ZIP MIAMI LAKES FL CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if ment with an address, with all other like empowered PRESIDENT

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

TITLE

STREET ADDRESS

CITY-ST-ZIP

HS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR MISIE D

□ Delete

4/10/00

305/824-0024

☐ Change

☐ Addition