

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

4/1

FILED
May 05, 2008 8:00 am
Secretary of State

04-14-2008 90068 015 ***158.75

DOCUMENT # 447112	
1. Entity Name FORT LAUDERDALE TRANSFER & RIGGING, INC.	
	
Principal Place of Business 4701 SOUTHWEST 36TH STREET FT. LAUDERDALE, FL 33314	Mailing Address 4701 SOUTHWEST 36TH STREET FT. LAUDERDALE, FL 33314
DO NOT WRITE IN THIS SPACE	

66009721



04092008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1511897	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DOROSY, THEODORE E JR 4701 SOUTHWEST 36TH STREET FT. LAUDERDALE, FL 33314	DO NOT WRITE IN THIS SPACE
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DOROSY, THEODORE E 4701 S W 36TH ST FORT LAUDERDALE, FL 33314
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DOROSY, KATHLEEN M 4701 S W 36TH ST FORT LAUDERDALE, FL 33314
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DOROSY, T.E 4701 SW 36 ST FORT LAUDERDALE, FL 33314
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *T.E. Dorosy* **5-2-08** **954-584-3826**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone