

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000006844

1. Entity Name

CORDIN TRANSPORT, INC.

FILED

02 AUG 23 AM 9: 58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

27650 FRANKLIN RD.  
SOUTHFIELD MI 48034

Mailing Address

27650 FRANKLIN RD.  
SOUTHFIELD MI 48034

2. Principal Place of Business

30 OAK Hollow

3. Mailing Address

30 OAK Hollow

Suite, Apt. #, etc.

Suite 240

Suite, Apt. #, etc.

Suite 240

City & State

Southfield MI

City & State

Southfield MI

Zip

48034

Country

USA

Zip

48034

Country

USA

DO NOT WRITE IN THIS SPACE

06/19/02 90928 044 550.00

4. FEI Number

38-1985795

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

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

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

-(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSD  
NAME CHAMBERS, ROBERT C  
STREET ADDRESS 27650 FRANKLIN ROAD  
CITY-ST-ZIP SOUTHFIELD MI 48034 ☒ Delete

TITLE VTD  
NAME CHAMBERS, MARK S  
STREET ADDRESS 27650 FRANKLIN ROAD  
CITY-ST-ZIP SOUTHFIELD MI 48034 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT  
NAME ROBERT C CHAMBERS  
STREET ADDRESS 30 OAK Hollow Ste 240  
CITY-ST-ZIP Southfield MI 48034 ☒ Change ☐ Addition

TITLE DIRECTOR  
NAME JACK GROSS  
STREET ADDRESS 160 CLAIREMONT  
CITY-ST-ZIP DECATUR GA 30030 ☐ Change ☒ Addition

TITLE DIRECTOR / VICE PRESIDENT  
NAME ROBERT FLEMING  
STREET ADDRESS 160 CLAIREMONT  
CITY-ST-ZIP DECATUR GA 30030 ☐ Change ☒ Addition

TITLE DIRECTOR  
NAME STAN WEAVER  
STREET ADDRESS 160 CLAIREMONT  
CITY-ST-ZIP DECATUR GA 30030 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 8/16/02 248-351-9550

Date

Daytime Phone #