2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2004 08:00 AM
Secretary of State

DOCUMENT # H22242

1. Entity Name
RED & WHITE TRUCKING CORPORATION

Principal Place of Business	Mailing Address
% ARMANDO LOPEZ 1027 NO. "C" STREET LAKE WORTH FL 33460	% ARMANDO LOPEZ 1027 NO. "C" STREET LAKE WORTH, FL 33460

DO NOT WRITE IN THIS SPACE

07062004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2451192
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, ARMANDO
1027 NO. "C" STREET
LAKE WORTH, FL 33460

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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 _____ DATE
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required where indicated)

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	LOPEZ, ARMANDO, JR
STREET ADDRESS	1027 NO. "C" STREET
CITY-ST-ZIP	LAKE WORTH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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09/09/04-80004-017 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Armando Lopez Jr. 9/1/04 561-697-2508
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #