

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90075 023 ***150.00

DOCUMENT # K35355

1. Entity Name

BMB TRANSPORTATION, INC.

N/C 05/01/2000
 ✓ (TK)

Principal Place of Business

Mailing Address

~~601 BRICKELL KEY DR. #802~~
 MIAMI, FL. 33131

~~601 BRICKELL KEY DR. #802~~
 MIAMI, FL. 33131

2. Principal Place of Business

1110 BRICKELL AVE. #430

3. Mailing Address

1110 BRICKELL AVE. #430

Suite, Apt. #, etc.
 430

Suite, Apt. #, etc.
 430

City & State
 MIAMI, FL.

City & State
 MIAMI, FL.

Zip
 33131

Country
 USA

Zip
 33131

Country
 USA

4. FEI Number
 65-0222982

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~VAZQUEZ, GERARDO~~
~~601 BRICKELL KEY DR. #802~~
~~MIAMI, FL. 33131~~

Name
 RAFAEL MCCAUSLAND
 Street Address (P.O. Box Number is Not Acceptable)
 1110 BRICKELL AVE., #430
 City
 MIAMI FL Zip Code
 33131

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 RAFAEL MCCAUSLAND-PRESIDENT 4/24/01
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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
	VAZQUEZ, GERARDO A. ESQ.		
	501 BRICKELL KEY DR. #407		
	MIAMI, FL. 33131		
	PSD		
	MCCAUSLAND, RAFAEL		
	1110 BRICKELL AVE. #430		
	MIAMI, FL. 33131		

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: RAFAEL MCCAUSLAND-PRESIDENT 4/23/01 305-957-1526
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone *