

**AMENDED
2000 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #K72185

1. Entity Name

Speed Cargo Services, INC.

Principal Place of Business

Mailing Address

**7500 NW-81 Place, Suite 1 & 2
Miami, FL 33166**

2. Principal Place of Business

7500 NW-81 Place

3. Mailing Address

7500 NW 81 Place

Suite, Apt. #, etc.

Suite 1 & 2

Suite, Apt. #, etc.

Suite 1 & 2

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33166

Country

USA

Zip

33166

Country

USA

4. FEI Number

650107568

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

**Paz, Nestor
7500 NW 81 Place
Suite 1 & 2
Miami, FL 33166**

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 **Director, Pres, T** ☐ Delete
NAME **Nestor Paz**
STREET ADDRESS **3051 SW 114 Avenue**
CITY-ST-ZIP **Miami, FL 33165**

TITLE **Director, VP, S** ☐ Delete
NAME **Carlos Rice**
STREET ADDRESS **8578 SW 113 Place**
CITY-ST-ZIP **Miami, FL 33173**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **300003423513--2**
CITY-ST-ZIP **-10/12/00--01087--014**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS *******61.25 *****61.25**
CITY-ST-ZIP

TITLE **Second Vice President** ☐ Change ☒ Addition
NAME **Alberto A. Rodriguez**
STREET ADDRESS **15315 SW 73 Terrace, Cir 7**
CITY-ST-ZIP **Miami, FL 33193**

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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

10/3/2000

305-477-8030

CR2E034 (5/00)