## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000018345

Entity Name: LIMITED TRANSPORTATION, LLC

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:	<b>New Principal Place of Business:</b>
--------------------------------------	---

4131 MISSION CT.

203

KISSIMMEE, FL 34741

Current Mailing Address: New Mailing Address:

4131 MISSION CT. 13650 LAKE VINING DRIVE 203 2106

KISSIMMEE, FL 34741 ORLANDO, FL 32821

FEI Number: 20-0000211 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TORO, RUBEN D 7345 SAND LAKE RD. 204 ORLANDO, FL 32819 US

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:

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MEMBERS:**

**ADDITIONS/CHANGES:** 

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ALEXANDRE'S TRANSPOR, TATION CORP.
 Name:

 Address:
 4131 MISSION CT. #203
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34741
 City-St-Zip:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

Name: FLOPS-FLIGHT OPERATI, ONS-GROUND HAN D LING SE Name: FLYOPS SERVICOS DE O, PERACOES DE VO O S LTDA

 Address:
 4131 MISSION CT. #203
 Address:
 7597 NW 7TH STREET

 City-St-Zip:
 KISSIMMEE, FL 34741
 City-St-Zip:
 MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EDILTON BRUNO ETORE MANTOVANI MGRM 04/30/2003