


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2008 08:00 A
Secretary of State

DOCUMENT # L25009	
1. Entity Name YOUNG TRANSPORT, INC., II	
	
Principal Place of Business 1521 SW LEJEUNE RD CORAL GABLES, FL 33134	Mailing Address 1521 SW LEJEUNE RD CORAL GABLES, FL 33134



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0151589	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FORMAN, TERRY J.
1521 SW LEJEUNE RD
CORAL GABLES, FL 33134

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FORMAN, TERRY J. 1521 SW LEJEUNE RD CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD YOUNG, DALE 2269 S. UNIVERSITY DR., #302 DAVIE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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01/11/08-80005-025 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Dale Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DALE YOUNG

1-8-08
Date

954.816.0122
Daytime Phone #