

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L77421

1. Entity Name  
TMX LOGISTICS, INC.

**FILED**  
**Jun 20, 2002 8:00 am**  
**Secretary of State**

06-20-2002 90061 022 \*\*\*558.75

Principal Place of Business  
8005 NW 80TH STREET  
MIAMI FL 33166-2173  
US

Mailing Address  
P.O. BOX 21647  
FT. LAUDERDALE FL 33335  
US



2. Principal Place of Business  
2051 SE 35TH ST.  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
FT. LAUDERDALE FL  
Zip  
33316  
Country  
USA

City & State  
Zip  
Country

4. FEI Number 65-0019426  
Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

CHESTER, BRITT K  
2051 SE 35TH STREET  
BOX 21647  
FT LAUDERDALE FL 33335

## 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 \$150.00**  
**After May 1, 2002 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHESTER, BRITT K. 2051 SE 35TH ST, BOX 21647 FT LAUDERDALE FL 33335	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHESTER, JEREMY 2051 SE 35TH ST, BOX 21647 FT LAUDERDALE FL 33335	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHESTER, KEVIN 2051 SE 35TH ST, BOX 21647 FT LAUDERDALE FL 33335	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SOUSA, KENNETH G 2051 SE 35TH ST, BOX 21647 FT LAUDERDALE FL 33335	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth G. Sousa

Date

6/13/2002

Daytime Phone #

984-331-2000

CR2E034 (9/01)