2001 UNIFORM BUSINESS REPORT (UBR)

May 15, 2001 8:00 am³ Secretary of State DOCUMENT # N98000004437 1. Entity Name 05-15-2001 90075 037 ****61.25 COOPERATION TRUCKING II, INC. Principal Place of Business Mailing Address ATTN: LARRY SCHWARTZ ATTN: LARRY SCHWARTZ 11540 HIGHWAY 92 EAST 11540 HIGHWAY 92 EAST SEFFNER FL 33584 SEFFNER FL 33584 2. Principal Place of Business 3. Mailing Address Suite Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3532919 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MCINTOSH, ANDREW L 101 E KENNEDY BLVD SUITE 2000 **TAMPA FL 33602** City 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 FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD 60 TITLE TITLE Change Addition Delete STUART SULS EAST NAME HIGGINS, BRENDA NAME STREET ADDRESS 11540 HWY 92 EAST STREET ADDRESS Seffner, Fl CITY-ST-ZIP CITY-ST-ZIP SEFFNER FL 33584 TITLE Change TITLE lICTOR RAMERIZ CHILDERS, PEGGY NAME NAME 11540 HWY SO EAST STREET ADDRESS STREET ADDRESS 11540 HWY 92 EAST SEFFNER, FL. 33584 CITY-ST-ZIP CITY-ST-ZIP SEFFNER FL 33584 TITLE □ Delete TITLE Addition FRED BALDGH NAME BALDGN, FRED NAME 11540 HWX 82 EAST STREET ADDRESS STREET ADDRESS 11540 HWY 92 EAST CITY-ST-ZIP CITY-ST-ZIP SEFfwen Rc. 33584 SEFFNER FL 33584 TITLE ☐ Delete TITLE AndRew Johnson NAME NAME 11540 HWY 92 EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEffren Fl. 33584 TITLE ☐ Delete Addition ENRIQUE COTOGNA NAME NAME 11540 HWY 92 EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all offer like empowered.

SIGNATURE:

813623-5400

FILED