2/1

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2001 8:00 am
Secretary of State
02-01-2001 90112 001 ***150.00

DOCUMENT # P00000026936

1. Entity Name
R & H TRANSPORT SERVICES INC.

Principal Place of Business	Mailing Address
P.O. BOX 1754 HERNANDO FL 34442-1754	P.O. BOX 1754 HERNANDO FL 34442-1754

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3633696 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

METTS, RUTH A
2329 N. SKEETER TERR.
HERNANDO FL 34442

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

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, 2001 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NETTS, RUTH A 2329 N. SKEETER TERR. HERNANDO FL 34442	☐ Delete	TITLE	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD NETTS, HAROLD J 2329 N. SKEETER TERR. HERNANDO FL 34442	☐ Delete		Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		Addition

Please correct the spelling of our last names.

Thank you

Ruth A. Metts

METTS

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify for ... indicated on this report or supplemental report is true and accurate and that my signature shall have the same ... 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 ... director changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ruth A. Metts, President 01-24-01 352-344-3396
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #