

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90189 015 ***150.00

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DOCUMENT # P00000073960

1. Entity Name
ARLEY TRANSPORT, INC.



Principal Place of Business
1299 W 72 ST
HIALEAH FL 33014

Mailing Address
P.O. BOX 22482
HIALEAH FL 33002

2. Principal Place of Business
5837 DAHLIA DR
Suite, Apt. #, etc.

3. Mailing Address
5837 DAHLIA DR.
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
ORLANDO FL.
Zip
32807
Country

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ORLANDO - FL.
Zip
32807
Country

4. FEI Number
65-1036024

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FERNANDEZ, ZORAYA
1299 W. 72 ST.
HIALEAH FL 33014

+ Zoraya Fernandez

7. Name and Address of New Registered Agent

Name
ZORAYA FERNANDEZ
Street Address (P.O. Box Number is Not Acceptable)
5837 DAHLIA DR.

City
ORLANDO
FL
Zip Code
32807

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

4/3/02

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

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	D FERNANDEZ, ZORAYA 1299 W 72 ST. HIALEAH FL 33014	<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
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	ZORAYA FERNANDEZ 5837 DAHLIA DR ORLANDO - FL 32807	<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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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 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:

Zoraya Fernandez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/02
Date

407-737-7646
Daytime Phone #

CR2E034 (10/02)