FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jul 11, 2002 8:00 am Secretary of State P01000001169 DOCUMENT # 1. Entity Name 07-11-2002 90243 011 ***158.75 EZ TRUCKING INC. Principal Place of Business Mailing Address DATYODAA 1473 NW 63RD AVE. 1473 NW 63RD AVE. SUNRISE FL 33313 SUNRISE FL 33313 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 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HENRY, YVONNE ess (P.O. Box Number is Not Acceptable) 1473 NW 63RD AVE. SUNRISE FL 33313 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. 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 FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete Addition NAME HENRY, YVONNE NAME STREET ADDRESS 1473 NW 63RD AVE. STREET ADDRESS CITY-ST-ZIP SUNRISE FL 33313 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition 🗀 Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP_ CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

CITY-ST-ZIP

Attachment EZ TRUCKING INC p# POI 000001/169 BU128690 1473 NW 63 AVE SUNRISE FL 33313 TO WHOM IT MAY CONCERN PLEASE BE ADVISED THAT: 1119 UBR ON JULY-1, 2002. THIS IS THE FIRST AND ONLY UBR I HAVE RECEIVED. AT NO TIME DID I RECEIVE A KUPORT; IT WAS ONLY OM July 1, 2002 THAT I RECEIVE THE REPORT. ENCLOSE PLEASE FIND FOUT FOR BNE HUNDRED AND GENTS. \$158-75. SINCERELY PAGE.