

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90183 019 ***150.00

10050832

DO NOT WRITE IN THIS SPACE

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000028921

1. Entity Name

Royal Cargo Line, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1928 NW 82nd Avenue

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

4. FEI Number

65-1086542

Applied For

Not Applicable

Zip

33126

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Charlie Diaz

Street Address (P.O. Box Number is Not Acceptable)

1982 NW 82nd Avenue

City

Miami

FL

Zip Code
33126

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IN THIS SPACE**

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

P

NAME

Charlie Diaz

STREET ADDRESS

1928 NW 82nd Avenue

CITY-ST-ZIP

Miami, FL. 33126

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

V

NAME

Claudia Quintero

STREET ADDRESS

1928 NW 82nd Avenue

CITY-ST-ZIP

Miami, FL. 33126

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowerments.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/03
Date

(305) 963-0033
Daytime Phone #

CR2E034B (12/02)