

UNIFORM BUSINESS REPORT (UBR)

132

FILED

02 OCT -1 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200008342082--6
-10/11/02--01084--017
****150.00 ****150.00

DOCUMENT # 101000055865	
1. Entity Name Global Transportation Corporation	
Principal Place of Business Mailing Address 	
2. Principal Place of Business 21 8435 NW 72nd Street	3. Mailing Address 26 Suite, Apt. #, etc.
22 Suite, Apt. #, etc.	27 City & State
23 Miami FL	28 Zip
24 33166	25 Miami-Dade

4. FEI Number applied for	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Corporate Creations Network Inc. 941 Fourth Street Miami Beach, FL 33139	81 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 FL

8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so <input type="checkbox"/> (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May be added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE Director <input checked="" type="checkbox"/> DELETE	1.1 TITLE P/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME Michael A. Moore	1.2 NAME Demetrius Anderson
STREET ADDRESS 3804 NW 207th	1.3 STREET ADDRESS 8435 NW 72nd Street	CITY-ST-ZIP MIAMI FL 33055	1.4 CITY-ST-ZIP Miami, FL 33166
TITLE <input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	2.2 NAME
STREET ADDRESS	2.3 STREET ADDRESS	CITY-ST-ZIP	2.4 CITY-ST-ZIP
TITLE <input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	3.2 NAME
STREET ADDRESS	3.3 STREET ADDRESS	CITY-ST-ZIP	3.4 CITY-ST-ZIP
TITLE <input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	4.2 NAME
STREET ADDRESS	4.3 STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP
TITLE <input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	5.2 NAME
STREET ADDRESS	5.3 STREET ADDRESS	CITY-ST-ZIP	5.4 CITY-ST-ZIP
TITLE <input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	6.2 NAME
STREET ADDRESS	6.3 STREET ADDRESS	CITY-ST-ZIP	6.4 CITY-ST-ZIP

13. I do 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 annual report or supplemental annual 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, or on attachment with an address.

SIGNATURE Demetrius Anderson, President **19 Sept 02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Global Transportation Corporation

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. 150.00 check payable to Florida Department of State

We never received the Uniform Business Report that should have been mailed to us. Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

Sincerely,

Date: