

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Oct 02, 2002 8:00 am
Secretary of State

10-02-2002 90119 007 ***150.00

DOCUMENT #

1. Entity Name

SUCH A TRANSPORT OF GLADES INC.
PO 1000093249

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4475 Springwood Rd

3. Mailing Address

P.O. Box 6545

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Spring Hill FL

City & State

Spring Hill FL

4. FEI Number

1650422564

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

Zip

Country

34609

USA

Zip

Country

34611

USA

7. Name and Address of Current Registered Agent

Name

Carmela Welch

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

4475 Springwood Rd

City

Spring Hill

FL

Zip Code

34609

**DO NOT WRITE
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.

SIGNATURE

Carmela Welch

Signature, typed or 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
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
CARMELA WELCH
4475 SPRINGWOOD RD
SPRING HILL FL 34609

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Carmela Welch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED34B (12/01)

Attachment

P.O. Box 6545
Spring Hill, FL 34609

078745

P01000093249

Such A Transport

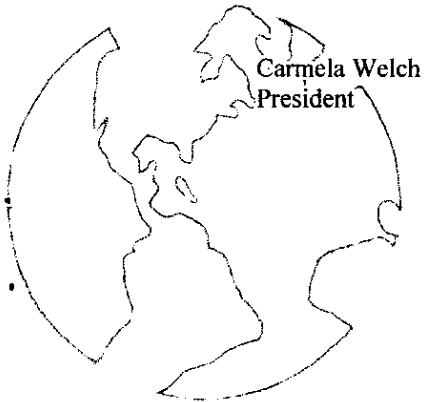
October 1, 2002

P.O. Box 1500
Tallahassee, FL 32302

Dear Sir or Madam:

This is to inform you that I never received paperwork to renew my corporation. I had no idea that I was late in filing. Please accept my apologies. We are a small business struggling in this economy.

Sincerely, Carmela Welch



[Click here and type slogan]