

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000109474

1. Entity Name
D.O.T. SERVICE COURIERS INC.



Principal Place of Business
15063 SW 57TH STREET
MIAMI FL 33193

Mailing Address
15063 SW 57TH STREET
MIAMI FL 33193

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1152121

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

D.O.T. SERVICE COURIERS, INC.
15063 SW 57 STREET
MIAMI FL 33193

Name JUAN F. ROA JR.

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

15063 SW 57 STREET.

City MIAMI

FL Zip Code 33193

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 JUAN F. ROA JR.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5-04-03

DATE

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 DP
NAME ROA, JUAN F JR
STREET ADDRESS 15083 SW 57TH STREET
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE DS
NAME ROA, JUAN F
STREET ADDRESS 15083 SW 57TH STREET
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT ☒ Change ☐ Addition
NAME JUAN F. ROA JR
STREET ADDRESS 15063 SW 57 ST
CITY-ST-ZIP MIAMI, FL 33193

TITLE SECRETARY ☒ Change ☐ Addition
NAME JUAN F. ROA
STREET ADDRESS 15063 SW 57 STREET
CITY-ST-ZIP MIAMI, FL 33193

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

Juan F. Roa 4-15-03 786-251-7953

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
APR 24 2003 8:00 AM
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04-21-2003 90544 024 ***150.00
03 MAY -7 PM 2:22



☐ CHECK HERE IF MAKING CHANGES

5/14/03