

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0134074 AV

DOCUMENT # P01000115281

1. Entity Name
LAND-BRIDGE EXPRESS-INC.



James G Carr
~~00000000000000000000~~
FILED
550
03 SEP -9 AM 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
4141 16TH ST BLD 6 APT 4
VERO BCH FL 32960

Mailing Address
4141 16TH ST BLD 6 APT 4
VERO BCH FL 32960

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 80-0009241

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

CARR, JAMES G
4141 16TH ST BLD 6 APT 4
VERO BCH FL 32960

Name

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

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DCPT
CARR, JAMES G
4141 16TH ST BLD 6 APT 4
VERO BCH FL 32960 ☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP
800022884318
09/03/03--01060--021 **550.00 ☐ Change ☐ Addition

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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:

James G Carr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/31/03 772-569-9100
Date Daytime Phone #

CR2E034 (10/02)