

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90278 013 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000028001 1. Entity Name B & T TRUCKING INC.																													
Principal Place of Business 6091 W 22 CT 106 HIALEAH, FL 33016		Mailing Address 6091 W 22 CT 106 HIALEAH, FL 33016																											
2. Principal Place of Business 2182 W 60st Suite, Apt. #, etc. 19-205 City & State Hialeah Zip 33016		3. Mailing Address 2182 W 60st Suite, Apt. #, etc. 19-205 City & State Hialeah Zip 33016		4. FEE Number 03-0459924 Applied For <input type="checkbox"/> Not Applicable																									
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent JACOBO, LUIS F 6230 W 21 CT HIALEAH, FL 33016			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																										
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when resigning.)</small>																													
FILE NOW!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE P NAME QUINTEROS, SERGIO M STREET ADDRESS 6091 W 22 CT #106 CITY-ST-ZIP HIALEAH, FL 33016 </td> <td style="width: 50%; padding: 2px;"> <input type="checkbox"/> Delete </td> </tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> </table>			TITLE P NAME QUINTEROS, SERGIO M STREET ADDRESS 6091 W 22 CT #106 CITY-ST-ZIP HIALEAH, FL 33016	<input type="checkbox"/> Delete											11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE P NAME Quinteros, Sergio M. STREET ADDRESS 2182 W 60 ST 19-205 CITY-ST-ZIP HIALEAH FL 33016 </td> <td style="width: 50%; padding: 2px;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> </table>			TITLE P NAME Quinteros, Sergio M. STREET ADDRESS 2182 W 60 ST 19-205 CITY-ST-ZIP HIALEAH FL 33016	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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)(1), 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 04-11-03 305-823-0656 <small>Daytime Phone #</small>																										

11032338



☐ CHECK HERE IF MAKING CHANGES

CH2E034 (10/02)