FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2003 8:00 am
Secretary of State
03-21-2003 90090 026 ***150.00

DOCUMENT # P02000042951

1. Entity Name

Universal Logistics Corp

DO NOT WRITE IN THIS SPACE

10045153

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2. Principal Place of Business	3. Mailing Address
937 Tall Pines Drive	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Port Orange FL	City & State
Zip: 32127 Country: USA	Zip Country

4. FEI Number 02-0595055 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Frederick Rose

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

937 Tall Pines Drive

City: Port Orange FL Zip Code: 32127

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: _____ DATE: _____
Signature required for printed name of registered agent and title, if applicable. (NOTE: Registered Agent may not sign for himself/herself.)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	Pres., V Pres., Sec., Treas. Fred Rose 937 Tall Pines Drive, Port Orange FL 32127
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Frederick A Rose 3-18-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Electronic Filing #