

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2003 8:00 am
Secretary of State

05-19-2003 90219 012 ***150.00

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DOCUMENT # P02000056713

1. Entity Name

J.D.S. FREIGHT CONSOLIDATORS, INC.



Principal Place of Business
14115 JEFFERSON STREET
MIAMI
FLORIDA 33176

Mailing Address
14115 JEFFERSON STREET
MIAMI
FLORIDA 33176



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

02-0606946

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

BACHOO, BISSOONDAYE
14115 JEFFERSON STREET
MIAMI FL 33176

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 ☐ Delete
NAME P
STREET ADDRESS BACHOO, BISSOONDAYE
CITY-ST-ZIP 14115 JEFFERSON STREET
MIAMI FL 33176

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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 empowerments.

SIGNATURE: ☒

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/12/03

305-717-5477

Date

Daytime Phone #

CR2E034 (10/02)

Attachment
ARNOLD D. POWELL
CERTIFIED PUBLIC ACCOUNTANT
8525 N.W. 53rd Terrace #105
Miami, Florida 33166
(305)470-9907 OR (305)441-1053
Fax: (305)477-1790

80119739
70200005 6713

2003 UNIFORM BUSINESS REPORT

FOR THE YEAR ENDING
DECEMBER 31, 2002

<i>ANNUAL REPORT</i>	
To be signed and dated by	THE OFFICERS AND REGISTERED AGENT(S)
Amount of tax due	BALANCE DUE \$ <u>150.00</u> (BEFORE MAY 1, 2003.....
Make check payable to	FLORIDA DEPARTMENT OF STATE
Mail return and check (if applicable) to	DIVISION OF CORPORATIONS -ANNUAL REPORTS P.O. BOX 1500 TALL, FL 32302-1500
Return must be mailed on or before	APRIL <u>30</u>, 2003*

***THE FEE FOR FILING AFTER MAY 1, 2003 INCREASES TO \$550.00**