


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

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90139 017 ***150.00

DOCUMENT # P02000069533	
1. Entity Name L & G Trucking Services Corp.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5917 N Habana ave		3. Mailing Address 5917 N Habana ave	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Tampa, Florida		City & State Tampa, FL	
Zip 33614	Country USA	Zip 33614	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3701568		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent	
Name Luis O. Gomez	
Street Address (P.O. Box Number is Not Acceptable) 5917 N Habana ave	
City Tampa	Zip Code FL 33614

**DO NOT WRITE
IN THIS SPACE**

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 **Luis O. Gomez, President** **4/6/05**
Signature of Registered Agent required when reinstating.

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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Luis O. Gomez 5917 N Habana ave, Tampa, FL, 33614	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary - Treasurer Isabel Carrera 5508 S 36th Ave Tampa, FL, 33619	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Luis O. Gomez** **4/6/05** **(813) 477-4905**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)