
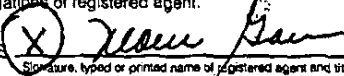



2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2003 8:00 am
Secretary of State

08-07-2003 90121 012 ***150.00

DOCUMENT # P02000079841					
1. Entity Name JAG TRUCKING CORP.					
Principal Place of Business 2050 POLO GARDENS DR. SUITE 202 WELLINGTON FL 33414			Mailing Address 2050 POLO GARDENS DR. SUITE 202 WELLINGTON FL 33414		
2. Principal Place of Business 2050 Polo Gardens Dr.			3. Mailing Address Same		
Suite, Apt. #, etc. 202			Suite, Apt. #, etc.		
City & State Wellington			City & State FL		
Zip 33414	Country Palm Beach	Zip 33414	Country USA	4. FEI Number 55-0787884	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARCIA, MARIA T 2050 POLO GARDENS DR. SUITE 202 WELLINGTON FL 33414			7. Name and Address of New Registered Agent 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  DATE 8/4/03 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARCIA, MARIA T 2050 POLO GARDENS DR. WELLINGTON FL 33414 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GARCIA, JOSE A 2050 POLO GARDENS DR. WELLINGTON FL 33414 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: SIGNATURE REQUIRED 			Date 8/4/03 Daytime Phone # 561-3637323		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

55054553

☐ CHECK HERE IF MAKING CHANGES

CP2E034 (4/03)

Attachment *55054555*
#P020000079841

**JAG TRUCKING CORP
2050 POLO GARDENS DR. SUITE 203
WELLINGTON, FL 33414**

Aug. 4, 2003

**DIV. OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500**

TO WHOM IT MAY CONCERN:

**Please be advised that JAG Trucking Corp. has not received any prior
notices of the 2003 Uniform Business Reports. Enclosed please find a check in the
amount of \$150 to cover the filing of this form.**

**If you should have any questions regarding the above, kindly contact me
directly at (561) 383-7323.**

Sincerely,

Maria Garcia
Maria Garcia