

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

05-19-2003 90226 030 ***150.00

0007199 AV

DOCUMENT # P02000102460

1. Entity Name

OPTI-TRANS, INC.



Principal Place of Business

9055 BRIDGECREEK DRIVE
JACKSONVILLE FL 32244

Mailing Address

1177 PARK AVENUE
SUITE 5. NO 199
ORANGE PARK FL 32073

** CHANGE*

2. Principal Place of Business

1555 KINGSLEY AVENUE

3. Mailing Address

1555 KINGSLEY AVENUE

Suite, Apt. #, etc.

SUITE # 404

Suite, Apt. #, etc.

SUITE # 404

City & State

ORANGE PARK, FL

City & State

ORANGE PARK, FL

Zip

32073

Country

USA

Zip

32073

Country

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

13-4211915

Applied For

Not Applicable

5. Certificate of Status Desired -- ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, STACY B
9055 BRIDGECREEK DRIVE
JACKSONVILLE FL 32244

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

[Signature]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5-15-03

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

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRES. JIMMY H. SMITH	
STREET ADDRESS	175 BLAKE AVE	
CITY-ST-ZIP	ORANGE PARK, FL 32073	
TITLE	V.P. STACY SMITH	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STACY SMITH	
STREET ADDRESS	9055 BRIDGECREEK DR	
CITY-ST-ZIP	JACKSONVILLE, FL 32244	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 empowered.

SIGNATURE:

[Signature] REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-15-03

904) 278-9676

Date

Daytime Phone #

CR2E034 (10/02)

Attachment
Doc # 102000102460
80120671

Re:Trans

RE Transportation, Inc.

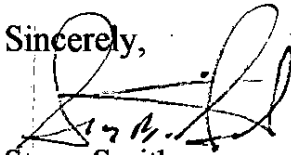
Re Transportation, Inc.

1555 Kingsley Avenue
Suite 404
Orange Park, FL 32073
Ph# (904) 278-9676
Fax# (904) 278-0112
www.re-trans.com

~~To Whom It May Concern:~~

Please accept the \$150.00 for the Uniform Business Report. We moved as indicated on UBR and did not receive report from post office in time to submit prior to May 1st. Our apologies for the late submittal. Thank you in advance for your understanding.

Sincerely,



Stacy Smith
VP-Retrans, Inc.
(904) 278-9676