

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 05, 2003 8:00 am**  
**Secretary of State**

09-05-2003 90116 035 \*\*\*150.00

DOCUMENT # P02000129360

1. Entity Name

Black Label Trucking, Inc



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

OCCLAHAWA FL.

3. Mailing Address

17897 S.E. 51st ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

17897 S.E. 51st ST

City & State

City & State

OCCLAHAWA FL. 32179

OCCLAHAWA, FL.

Zip

Country

Zip

Country

32179

USA

32179

MARION

4. FEI Number

59-3451379

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

JOHN B. WALKER

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

17897 S.E. 51st ST.

OCCLAHAWA, FL

City

**FL**

Zip Code

32179

**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

John B. Walker JOHN B. WALKER

9-1-03

DATE

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Take 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

PRESIDENT (P)

JOHN B. WALKER

17897 S.E. 51st

OCCLAHAWA, FL. 32179

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VICE PRESIDENT (V)

JOYCE A. WALKER

17897 S.E. 51st

OCCLAHAWA, FL. 32179

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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CITY-ST-ZIP

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IN THIS SPACE**

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:

John B. Walker (JOHN B. WALKER)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-1-03

Date

352-635-9304

Daytime Phone #

CR2E034B (12/02)

Attachment  
80144616

July 21, 2003

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: P02000128360  
Black Label Trucking, Inc.

Dear Sirs:

I had the Subject Company reinstated last November 2002. To date, I've had no word from the State when fees were due for 2003. I have been advised that an annual fee of \$150 is due, thus please note my check enclosed in that amount for 2003. *I ASK THAT YOU WAVE ANY PENALTIES BECAUSE I NEVER RECIEVED THE INITIAL REPORT*  
Please advise me what date the 2004 fee is due.

Thank you,

*John B. Walker*

John B. Walker  
17897 SE 51st. St.  
Ocklawaha, FL 32179

enclosure