

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000038539

1. Entity Name

I. SANTIAGO TRUCKING COMPANY



Principal Place of Business

1850 N. MAIN STREET
BELLE GLADE, FL 33430 US

Mailing Address

1850 N MAIN ST.
BELLE GLADE, FL 33430 US



01242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

41-2106851

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SANTIAGO, IVAN
1850 N. MAIN STREET
BELLE GLADE, FL 33430

**DO NOT WRITE
IN THIS SPACE**

8. The above information is true and correct to the best of my knowledge and belief, and I am familiar with the information furnished herein 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 obligation of, the information furnished herein.

SIGN: _____ (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000798743
01/30/08-80041-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SANTIAGO, IVAN
STREET ADDRESS	1850 NORTH MAIN STREET
CITY-ST-ZIP	BELLE GLADE, FL 33430
TITLE	VP
NAME	SANTIAGO, ROSE L
STREET ADDRESS	1850 N. MAIN STREET
CITY-ST-ZIP	BELLE GLADE, FL 33430
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____

1-16-08