

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P03000057747**
1. Entity Name
GONZALEZ TRUCKING SERVICES INC

FILED
04 MAY 18 AM 5:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
18850 SW 168 ST
Suite, Apt. #, etc.

3. Mailing Address
18850 SW 168 ST
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI FL
County
MIAMI DADE
Zip
33187

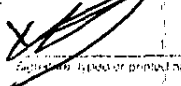
4. FSI Number
47-0920126
Applied For
Not Applicable

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
GREGORIO R. GONZALEZ
Street Address (P.O. Box Number is Not Acceptable)
18850 SW 168 ST
MIAMI
City **MIAMI** FL Zip Code **33187**

6. The above named entity certifies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE  DATE **5/13/04**
(NOTE: Registered Agent signature required when changing agent)

8. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐
(See criteria on back.)

January 1 - May 1 Fee is \$160.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS			
11. NAME GREGORIO R GONZALEZ	TITLE Pres	NAME 800037626658	
12. STREET ADDRESS 18850 SW 168 ST	STREET ADDRESS		
13. CITY-STATE-ZIP MIAMI FL 33187	CITY-STATE-ZIP	06/03/04--01038--004 **150.00	
14. NAME LEILA GONZALEZ	TITLE Secy	NAME 773	
15. STREET ADDRESS 18850 SW 168 ST	STREET ADDRESS		
16. CITY-STATE-ZIP MIAMI FL 33187	CITY-STATE-ZIP		
17. NAME	TITLE		
18. STREET ADDRESS	STREET ADDRESS		
19. CITY-STATE-ZIP	CITY-STATE-ZIP		
20. NAME	TITLE		
21. STREET ADDRESS	STREET ADDRESS		
22. CITY-STATE-ZIP	CITY-STATE-ZIP		
23. NAME	TITLE		
24. STREET ADDRESS	STREET ADDRESS		
25. CITY-STATE-ZIP	CITY-STATE-ZIP		

DO NOT WRITE
IN THIS SPACE

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 113.07(3)(b), 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 11 or on an attachment with an address, with the same or like empowered.

SIGNATURE  **GREGORIO R. GONZALEZ**

5-14-04

CR2E034B (12/01)