

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
 05-28-2002 91702 048 *****70.00

DOCUMENT # . P12 0000 25740

1. Entity Name

C. TERTUS TRUCKING, INC.

Principal Place of Business

2625 GREENFIELD AVE
 ORLANDO FL 32808

Mailing Address

2625 GREENFIELD AVE
 ORLANDO FL 32808

2. Principal Place of Business

Same

3. Mailing Address

Same

Suite, Apt. #, etc

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-8033487

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

TERTUS, CLAUDE
 2625 GREENFIELD AVE
 ORLANDO FL 32808

7. Name and Address of New Registered Agent

Name

None

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE D
 NAME TERTUS, CLAUDE
 STREET ADDRESS 2625 GREENFIELD AVE.
 CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete

TITLE VS
 NAME PERARD, ROSENELLE
 STREET ADDRESS 2625 GREENFIELD AVE.
 CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete

TITLE
 NAME TERTUS, RODRIGUE
 STREET ADDRESS 2625 GREENFIELD AVE.
 CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete

TITLE
 NAME TERTUS, THEODORE
 STREET ADDRESS 2625 GREENFIELD AVE
 CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete

TITLE
 NAME TERTUS, LORIANNE
 STREET ADDRESS 2625 GREENFIELD AVE
 CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ 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 617, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Claude TERTUS

Date

5/05/02

Daytime Phone #

(321) 663-8717