

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90302 037 ***150.00

DOCUMENT # P93000049366

1. Entity Name

M & R CARTAGE, INC.

Principal Place of Business

Mailing Address

2973 NW 71 ST
 MIAMI FL 33147
 US

2973 NW 71ST ST
 MIAMI FL 33147-5933
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0423306

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FELDMAN, MINDY A CPA
500 NE SPANISH RIVER BLVD
STE 16
BOCA RATON FL 33431

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.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: Delete
 NAME: **VT**
 STREET ADDRESS: **GREENFIELD, AUREA**
 CITY-ST-ZIP: **12311 NW 27 PL CORAL SPGS FL 33065**

TITLE: Change Addition
 NAME: **VTS GREENFIELD AUREA**
 STREET ADDRESS: **12311 NW 27 P**
 CITY-ST-ZIP: **CORAL SPRINGS FL 33065**

TITLE: Delete
 NAME: **PD**
 STREET ADDRESS: **GREENFIELD, EMMETT**
 CITY-ST-ZIP: **12311 NW 27 PL CORAL SPGS FL 33065**

TITLE: Change Addition
 NAME: **P EMMETT GREENFIELD**
 STREET ADDRESS: **12311 NW 27 PL**
 CITY-ST-ZIP: **CORAL SPRINGS FL 33065**

TITLE: Delete
 NAME: **S**
 STREET ADDRESS: **MONIZ, DENNIS**
 CITY-ST-ZIP: **12440 NW 15 ST 3-102 SUNRISE FL 33322**

TITLE: Change Addition
 NAME: **S**
 STREET ADDRESS: **MONIZ, DENNIS**
 CITY-ST-ZIP: **12440 NW 15 ST 3-102 SUNRISE FL 33322**

TITLE: Delete
 NAME: **S**
 STREET ADDRESS: **MONIZ, DENNIS**
 CITY-ST-ZIP: **12440 NW 15 ST 3-102 SUNRISE FL 33322**

TITLE: Change Addition
 NAME: **S DAVID J. MONIZ**
 STREET ADDRESS: **12311 NW 27 PL**
 CITY-ST-ZIP: **CORAL SPRINGS FL 33065**

TITLE: Delete
 NAME: **S**
 STREET ADDRESS: **MONIZ, DENNIS**
 CITY-ST-ZIP: **12440 NW 15 ST 3-102 SUNRISE FL 33322**

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13. 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, the receiver or trustee of the corporation, or the executor of the will of the decedent; and that my name appears in Block 11 or Block 12 if changed, or on an instrument with an addressee like employee, etc.

SIGNATURE: *Aurea Greenfield* Vice Pres

Date: 04-28-2000 Daytime Phone #: 800-656-545