

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortimer  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 SEP -6 PM 1:09

DOCUMENT # **P94000006660 (2)**

1. Corporation Name

**VUG TRUCKING COMPANY, INC.**



Principal Place of Business

21227 US 9 N. 145-A  
CLEARWATER FL 34625

Mailing Address

21227 US 9 N. 145-A  
CLEARWATER FL 34625

3. Date Incorporated or Qualified  
**01/18/1994**

3a. Date of Last Report  
**10/30/1995**

4. FEI Number  
**59-3217014**

Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business

21 1045 CAPTAINS WAY

2a. Mailing Address

26 1045 CAPTAINS WAY

Suite, Apt. #, etc

Suite, Apt. #, etc

22 TARPON

27

City & State

City & State

23 TARPON SPRINGS-FL

28 TARPON SPRINGS-FL

Zip

Country

Zip

Country

24 34689

25 USA

29 34689

30 USA

9. Name and Address of Current Registered Agent

MOULING, KATHY L  
308 E. BUFFALO AVE.  
TAMPA FL 33603

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

Date of Registration (Agent Signature Required when Agent Changes)

DATE

12. OFFICERS AND DIRECTORS

TITLE  DELETE  
NAME **D ULLOA, WILLIAM**  
STREET ADDRESS **21227 US 9 N. 145-A**  
CITY-ST-ZIP **CLEARWATER FL 34625**

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE  Change  Addition  
NAME **D ULLOA, WILLIAM**  
STREET ADDRESS **1045 CAPTAINS WAY**  
CITY-ST-ZIP **TARPON SPRINGS- FL 34689**

2 1 TITLE  Change  Addition  
NAME **800001946203**  
STREET ADDRESS **-09/12/96--01108--013**  
CITY-ST-ZIP **\*\*\*\*225.00 \*\*\*\*225.00**

3 1 TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4 1 TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5 1 TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6 1 TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

SIGNATURE:

*William G. Ulloa* **William G. Ulloa**

9/3/96

(813) 942-3602

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Digitally Printed

CR2E034 (12/95)