

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State
 04-04-2001 90071 022 ***150.00

0427612

DOCUMENT # P94000006660
 1. Entity Name
VUG TRUCKING COMPANY, INC.

Principal Place of Business 1045 CAPTAINS WAY TARPON SPRINGS FL 34689	Mailing Address 1045 CAPTAINS WAY TARPON SPRINGS FL 34689
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00041373



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 9812 GRETNA GREEN DR.	3. Mailing Address 9812 GRETNA GREEN DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State TAMPA - FL	City & State TAMPA - FL
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4. FEI Number 59-3217014	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

Zip 33626	Country USA	Zip 33626	Country USA
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
**MOULING, KATHY L
 308 E. BUFFALO AVE.
 TAMPA FL 33603**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D ULLOA, WILLIAM	1045 CAPTAINS WAY	TARPON SPRINGS FL 34689	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	D ULLOA, WILLIAM	9812 GRETNA GREEN DR.	TAMPA - FL 33626	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Ulloa **WILLIAM UULLOA** **4/7/1** **(813)926-2926**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)