

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90448 046 ***150.00

DOCUMENT # P94000060728

1. Entity Name

BASS TRUCKING, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4920 NW 63TR

3. Mailing Address

PO Box 568

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Bell

BELL

City & State

City & State

FL

FL

Zip

Zip

32619

32619

Country

Country

Gilchrist

Gilchrist

4. FEI Number

59-3262341

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

BASS TRUCKING

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

4920 NW 63TR

City

BELL

FL

Zip Code

32619

**DO NOT WRITE
IN THIS SPACE**

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 Marilyn Bass

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

(NOTE: Registered Agent signature required when reinstating)

4-15-2002

DATE

9. 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 \$150.00

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**

11. OFFICERS AND DIRECTORS

TITLE
NAME

MASON BASS PRES

STREET ADDRESS
CITY-ST-ZIP

4920 NW 63TR
BELL FL 32619

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

Sec
MARILYN BASS

STREET ADDRESS
CITY-ST-ZIP

4920 NW 63TR
BELL FL

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

CR2E034B (12/01)

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 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 all other like empowered.

SIGNATURE: Marilyn Bass

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-2002 386-935-2018

Date

Daytime Phone #