

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P94000085221

1. Entity Name
DEL AGUILA BUS SERVICE, INC.



FILED

05 APR 21 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
825 LISBON STREET
CORAL GABLES, FL 33134

Mailing Address
825 LISBON STREET
CORAL GABLES, FL 33134

2. Principal Place of Business
7520 SW 57th Ave.

3. Mailing Address
7520 SW 57th Ave.

Suite, Apt. #, etc.
Suite D

Suite, Apt. #, etc.
Suite D

City & State
South Miami, FL

City & State
South Miami, FL

Zip
33143

Country
USA

Zip
33143

Country
USA

04152005 Chg-P CR2E034 (10/03)

4. FEI Number
65-0545804

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DEL AGUILA, JOSE JR.
825 LISBON STREET
CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent

Name
Jose Del Aguila, Jr.
Street Address (P.O. Box Number is Not Acceptable)

7520 SW 57th Ave. Suite D
City South Miami FL Zip Code 33143

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Jose Del Aguila, Jr. PRES.
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/15/05
DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME DEL AGUILA, JOSE
STREET ADDRESS 825 LISBON STREET
CITY-ST-ZIP CORAL GABLES, FL 33134 ☐ Delete

TITLE D
NAME DEL AGUILA, SILVIA
STREET ADDRESS 825 LISBON STREET
CITY-ST-ZIP CORAL GABLES, FL 33134 ☐ Delete

TITLE VP
NAME DEL AGUILA, JOSE S. SR.
STREET ADDRESS 825 LISBON STREET
CITY-ST-ZIP CORAL GABLE, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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 607, 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: Jose Del Aguila, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/05
Date

(305) 446-6001
Daytime Phone #