

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

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90099 039 ***150.00

DOCUMENT #

1. Entity Name

P95000028884

Carl E. Stewart Trucking Service, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10815 Rockridge Road

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 4071

Suite, Apt. #, etc.

City & State **Lakeland, FL**

City & State **Plant City, FL**

Zip **33809** Country **USA**

Zip **33566** Country **USA**

4. FEI Number **59-3307165**

Applied For

Not Applicable

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

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Carl L. Stewart

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

10815 Rockridge Road

City **Lakeland**

FL

Zip Code **33809**

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 Carl E. Stewart

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

(NOTE: Registered Agent signature required when reinstating)

4-30-02
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

Owner

Carl E. Stewart

10815 Rockridge Road

Lakeland, FL 33809

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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: Carl E. Stewart

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-02 (863) 398-8327
Date Daytime Phone #