2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P95000058437 DOCUMENT

1. Entity Name

HENRY JR. TRUCKING INC.



FILED Apr 25, 2003 8:00 am Secretary of State

04-25-2003 90216 029 ***150.00

			1	A SI				
Principal Place of Business 9509 HWY 92 E TAMPA FL 33610		Mailing Address PO BOX 1833 RIVERVIEW FL 33569						
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State			59-3379793		<u> </u>	oplied For ot Applicable
Zip	Country	Zip	Country	(5. Certificate of Sta	itus Desired	\$8.75 Add	ditional
	6. Name and Address of Current	Registered Agent			7. Name and Addre	ess of New Register	red Agent	
WHITLOCK	K JR., HENRY C 7 92 E		Name Street Address		(P.O. Box Number is Not Acceptable)			
TAMPA FL								
			City				FL Zip Cod	e
	named entity submits this statement fo tions of registered agent. Signature, typed of signed name of registered agent		g its registered office (NOTE: Registered Agent sig			he State of Florida. I		and accept
After Make Check	ILE NOW!!! FAE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Fibrida Department o				Trust Fun	Campaign Financing nd Contribution.	Added	0 May Be I to Fees
10.5	OFFICERS AND		11.		ADDITIONS/CHAN	IGES TO OFFICERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHITLOCK, JR; HENRY C 3261 BLOOMINGDALE VILLAS CT BRANDON FL 33511	□ Delete	TITLE NAME STREET ADDRES: CITY-ST-ZIP	s			∐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3	-		☐ Change	Addition
TITLE NAME Street Address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3			☐ Change	Addition
TITLE Name Street Address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADDRESS CITY+ST-ZIP	3			☐ Change	Addition
TITLE Name Street adoress City-St-Zip		☐ Delete	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.

813681-6733

CR2E034 (10/02)