

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90257 009 ***150.00

0077809 AV

DOCUMENT # P95000060646

1. Entity Name

D & P TRUCKING, INC.

Principal Place of Business

**2480 NW 1ST ST
 BOYNTON BEACH FL 33435**

Mailing Address

**2480 NW 1ST ST
 BOYNTON BEACH FL 33435**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0601997

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**MOWATT, DURANT
 2480 NW 1ST ST
 BOYNTON BEACH FL 33435**

7. Name and Address of New Registered Agent

Name

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

City

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 ☐ Delete
 NAME **D**
 STREET ADDRESS **MOWATT, DURANT**
 CITY-ST-ZIP **2480 NW 1ST ST
 BOYNTON BEACH FL 33435**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **MOWATT, PAULETTE**
 CITY-ST-ZIP **2480 NW 1ST ST
 BOYNTON BEACH FL 33435**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

07-09-01 (661) 738-7869

CR2E034 (5/01)

Attachment
A007942

95000060646

2480 N. W. 1st Street
Boynton Beach, FL 33435
7-9-01

Florida Department of State
Division of Corporations.

Dear Sir/Madam,

This letter is to inform you that we did not receive a 2001 Uniform Business report for May, ~~we~~ ^{we} tried to contact the office on two occasions which we got the voice mail. We did leave a message and was waiting for the form to be sent. Then we got this form stating we owe five hundred fifty dollars. I called and spoke to a lady, I think her name is Jean and told her what happen. And I was advised to explain what had happen. I do hope this does not happen again. Thanks for your cooperation.

Sincerely
Paula M. Mowatt