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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Scoretary of State

1996

DIVISION OF CORPORATIONS P95000062724 (6) **DOCUMENT #** 

**REY & SON TRUCKING CORPORATION** 

Principal Place of Business Mailmo Address 1003 EAST 31ST AVENUE 1003 EAST 31ST AVENUE TAMPA FL 33603 TAMPA FL 33603 3. Date Incorporated or Qualified 3a. Date of Last Report 08/14/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2987490 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zσ Country Country 8. This corporation has liability for intangible tax under s. 199.032. 25 24 29 30 Florida Statutes ☐ Yes 👿 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NORBERTO REY. NOBERTO Street Address (P.O. Box Number is Not Acceptable) 82 1003 EAST 31ST AVENUE **TAMPA FL 33603** 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advantage of the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if apple and (NOTE Registered Agent supration required when he strong 12. CR2E034 (12/95) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PTD TUTLE DELETE 1. 1 T.TE Change ☐ Addition NORBERTO NAME REY. NOBERTO 1.2 NAME 1003 EAST 31ST AVENUE STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33603** CITY-ST-ZiP 1.4 CITY - ST - ZIP TiTLE VSD DELFTE 2 1 TIFLE Change Addition LUCRECIA REY, LUCRETIA 2.2 NAME STREET ADDRESS 1003 EAST 31ST AVENUE 2.3 STREET ADDRESS **TAMPA FL 33603** CITY - ST - ZIP 24 OTY-ST- ZP TITLE DELETE 3 1 TITLE Change ☐ Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS C-TY - ST - 7(P 3.4 City - ST- ZIP THLE DELETE 4 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - 7 P THE DELETE 5 1 TIPLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CHTY - ST - ZIF TITLE DELETE 6.1 TITLE [1] Change Addition NAME 6.2 NAMÉ STREET ADDRESS 6.3 STHEET ADDRESS CHY - S1 - 20F

64 CITY - ST ZIP

CNING OFFICER OR DIRECTOR

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustne empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: SIGNATURE TYPE