

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000098015

1. Entity Name

HUN TRANSPORT, INC.

FILED

Mar 17, 2000 8:00 am  
Secretary of State

03-17-2000 90078 012 \*\*\*150.00

Principal Place of Business

704 CAMDEN ROAD  
ALTAMONTE SPRINGS FL 32714

Mailing Address

704 CAMDEN ROAD  
ALTAMONTE SPRINGS FL 32714-1918

2. Principal Place of Business

3. Mailing Address

1055 Kensington Park Dr

1055 Kensington Park Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#107

#107

City & State

City & State

Altamonte Springs FL 32714

Altamonte Springs FL

Zip

Country

Zip

Country

32714

USA

32714

USA

4. FEI Number

59-3354337

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BERTA, DIANE H  
704 CAMDEN ROAD  
ALTAMONTE SPRINGS FL 32714

7. Name and Address of New Registered Agent

Name

Berta, Diane H.

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

1055 Kensington Park Dr.,

#107

City

Altamonte Springs

FL

Zip Code

32714

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

*Diane H Berta*

3/12/2000

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 \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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 BERTA, DIANE H  
CITY-ST-ZIP 704 CAMDEN ROAD  
ALTAMONTE SPRINGS FL 32714

TITLE ☐ Delete  
NAME D  
STREET ADDRESS BERTA, PAUL  
CITY-ST-ZIP 704 CAMDEN ROAD  
ALTAMONTE SPRINGS FL 32714

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 V/S/T/D  
STREET ADDRESS Berta, Diane H  
CITY-ST-ZIP 1055 Kensington Park Dr., #107  
Altamonte Springs, FL 32714

TITLE ☒ Change ☐ Addition  
NAME P/D  
STREET ADDRESS Berta, Paul  
CITY-ST-ZIP 1055 Kensington Park Dr., #107  
Altamonte Springs, FL 32714

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

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

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Diane H Berta*

3/12/2000

407-682-0383