

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000048670

1. Entity Name

FDL TRUCKING CORP.

**FILED**  
May 15, 2001 8:00 am  
Secretary of State

05-15-2001 90081 049 \*\*\*150.00

Principal Place of Business

1057 S. KIRKMAN RD  
#240  
ORLANDO FL 32811

Mailing Address

PO BOX 681067  
ORLANDO FL 32868  
US

000048670



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2018 Crestridge Dr.

3. Mailing Address

P.O. Box 681067

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clermont Fl

City & State

Orlando Fl

4. FEI Number

59-3378514

Applied For

Not Applicable

Zip

34711

Country

Zip

32868

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERNANDEZ, LIDUVINA  
2945 SOUTHGATE TERRACE  
ORLANDO FL 32818

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 \$150.00**  
**After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME HERNANDEZ, LIDUVINA  
STREET ADDRESS 2945 SOUTHGATE TERRACE  
CITY-ST-ZIP ORLANDO FL 32818 ☐ Delete

TITLE PD  
NAME Hernandez Liduvina  
STREET ADDRESS 2018 Crestridge Dr.  
CITY-ST-ZIP Clermont Fl 34711 ☒ Change ☐ Addition

TITLE STD  
NAME HERNANDEZ, FELIX A  
STREET ADDRESS 2945 SOUTHGATE TERRACE  
CITY-ST-ZIP ORLANDO FL 32818 ☐ Delete

TITLE STD  
NAME Hernandez Felix A  
STREET ADDRESS 2018 Crestridge Dr.  
CITY-ST-ZIP Clermont Fl 34711 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

*Liduvina Hernandez* President Liduvina Hernandez 4/25/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)