

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90051 027 ***158.75

DOCUMENT # P96000094524

1. Entity Name

DEBELLA TRUCKING INC.
13151 N. E. 47th ST.
WILLISTON FL 32696

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

13151 N.E. 47th ST
Suite, Apt. #, etc.

3. Mailing Address

13151 N.E. 47th ST.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

WILLISTON, FL.

City & State

WILLISTON, FL.

4. FEI Number

59-3412406

Applied For

Not Applicable

Zip

32696

Country

U.S.A

Zip

32696

Country

U.S.A

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Alfred L. DeBella

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

13151 N.E. 47th Street

City

WILLISTON

FL

Zip Code

32696

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

Alfred L. DeBella

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

(NOTE: Registered Agent signature required when reissuing)

APRIL 30, 2002

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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	PRESIDENT
NAME	Alfred L. DeBella
STREET ADDRESS	13151 N.E. 47th ST
CITY - ST - ZIP	WILLISTON, FL 32696
TITLE	VICE-PRESIDENT
NAME	Gloria J. DeBella
STREET ADDRESS	13151 N.E. 47th ST
CITY - ST - ZIP	WILLISTON, FL 32696
TITLE	SECRETARY - TREASURER
NAME	KAREN A. WARREN
STREET ADDRESS	15670 N.E. 7th PL.
CITY - ST - ZIP	WILLISTON, FL 32696
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Alfred L. DeBella ALFRED L. DeBella

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 30, 2002 (352) 528-2072

Date

Daytime Phone #

CR2E034B (12/01)