

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2003 8:00 am
Secretary of State

04-22-2003 90063 020 ***150.00

DOCUMENT # P97000006861

1. Entity Name

ZILA'S INTERNATIONAL TRANSPORTATION, INC.



Principal Place of Business
**504 FAHEY COURT
ORLANDO FL 32824**

Mailing Address
**4972 EAGLESMERE DR
APT #935
ORLANDO FL 32819**

2. Principal Place of Business

4980 WATERSIDE POINT CIR.

3. Mailing Address

4980 WATERSIDE POINT CIR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES



City & State

ORLANDO / FLORIDA

City & State

ORLANDO / FLORIDA

4. FEI Number

59-3430083

Applied For

Not Applicable

Zip

32-829

Country

ORANGE

Zip

32829

Country

ORANGE

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DE ABREU, JOAO B
7061 GRAND NATIONAL DR
STE 105B
ORLANDO FL 32819**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

OWNER
DE ABREU, JOAO B
7061 GRAND NATIONAL DR STE 105B
ORLANDO FL 32819

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

SECRETARY
BEZERRA, CELIA
4972 EAGLESMERE DR. # 935
ORLANDO, FL 32819

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIG. BEZERRA, CELIA DE ABREU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03

Date

407.468.6446

Daytime Phone #

CR2E034 (10/02)