

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000085301

FILED  
May 01, 2002 8:00 AM  
Secretary of State

Entity Name: GALBAN TRANSPORT, INC.

## Current Principal Place of Business:

17965 SAILFISH DR  
LUTZ, FL 33549

## New Principal Place of Business:

3412 PLEASANT LAKE DRIVE  
TAMPA, FL 33618

## Current Mailing Address:

17965 SAILFISH DR  
LUTZ, FL 33549

## New Mailing Address:

3412 PLEASANT LAKE DRIVE  
TAMPA, FL 33618

FEI Number: 59-3418139

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GALBAN, LUIS  
17965 SAILFISH DR  
LUTZ, FL 33549 US

## Name and Address of New Registered Agent:

GALBAN, LUIS  
3412 PLEASANT LAKE DRIVE  
TAMPA, FL 33618 US

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: LUIS GALBAN

05/01/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GALBAN, LUIS  
Address: 17965 SAILFISH DR  
City-St-Zip: LUTZ, FL 33549

Title: T ( ) Delete  
Name: GALBAN, EVA  
Address: 17965 SAILFISH DR  
City-St-Zip: LUTZ, FL 33549

Title: C ( ) Delete  
Name: ACOSTA, ALBERTO  
Address: 3412 PLEASANT LAKE DR  
City-St-Zip: TAMPA, FL 33618

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GALBAN, LUIS  
Address: 3412 PLEASANT LAKE DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change ( ) Addition  
Name: GALBAN, EVA  
Address: 3412 PLEASANT LAKE DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS GALBAN

D

05/01/2002

Electronic Signature of Signing Officer or Director

Date