

2000 UNIFORM BUSINESS REPORT (UBR)

1062

DOCUMENT # **PA7000093541**

1. Entity Name

B.C.B. Transportation Services, Inc.

Principal Place of Business

**321 N. Hennis Rd
Winter Garden FL
34787**

Mailing Address

**P.O. Box 750
Ocoee, FL 34761**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

**321 N. Hennis Rd
Winter Garden FL**

Suite, Apt. #, etc.

**P.O. Box 750
Ocoee FL**

City & State

City & State

Zip

Zip

Country

Country

34787

34761

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name **Bobby E. Brown**

Street Address (P.O. Box Number is Not Acceptable)
321 N. Hennis Rd

City

Ocoee

FL

Zip Code

34761

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

Bobby E. Brown President Bobby E. Brown

091700

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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: **Bobby E. Brown**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

091700
Date

407 877 7950
Daytime Phone #

CR2E034 (9/99)

08-31-00

TO: Florida Department of State
FROM: B. C. B. Transportation Services Inc
REF: P97000093541

I am writing this letter because I can't recall if I received my company notice for filing the Annual Report of Corporations. I realize this is my responsibility, but I relied on this notice to remind me to file the Paperwork. I am a one person office and also, working a full job. Thus I have a tendency to forget things. I would forget to pay certain bills if I did not receive a statement monthly. This report being a once a year requirement, it did slip my mind. I can only apologize and try to correct this matter. I would appreciate all understanding and consideration in this matter.

I will make a diligent effort to make sure I remember this report next year.

Any help in this matter will be greatly appreciated.

Thanking you in advance,



Bobby E. Brown, Owner
P. O. Box 750
Ocoee, Fl 34761
PHONE: 407-877-7950