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## **2001 UNIFORM BUSINESS REPORT (UBR)**

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

## Jan 29, 2001 8:00 am Secretary of State DOCUMENT # P97000100895 KAT TRANSPORTATION, INC. 01-29-2001 90142 011 \*\*\*150.00 Principal Place of Business Mailing Address 2060 WATER LEAF ST 2060 WATER LEAF ST ORLANDO FL 32837 ORLANDO FL 32837 907290 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3479715 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent DE PAULA JUNIOR, FRANCISCO M 4789 WALDEN CIR SUITE J ORLANDO FL 32811 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE 3R2E034 (10/00) ☐ Detete DE YALLA ISI, FRAMEIS CO 12 Change NAME DEPAULA, JR., FRANCISCO M STREET ADDRESS 4789 WALDEN CIR., SUITE J STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32811 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Detete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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