

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 26, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P97000104864**1. Entity Name  
DMH TRUCKING, INC.

## Principal Place of Business

696 VENEER DR

ALTAMONTE SPRINGS  
32714

FL

## Mailing Address

PO BOX 161786

ALTAMONTE SPRINGS  
32714

FL

## 2. Principal Place of Business

344 E. ORANGE ST.

## 3. Mailing Address

PO BOX 161786

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

## City &amp; State

ALTAMONTE SPRINGS

FL

## City &amp; State

ALTAMONTE SPRINGS

FL

## 4. FEI Number

59-3482308

## Applied For

Not Applicable

Zip  
32701Country  
USZip  
32716Country  
US

## 5. Certificate of Status Desired

☐**\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

HILT DIANE M  
696 VENEER DRALTAMONTE SPRINGS  
32714

FL

## 7. Name and Address of New Registered Agent

## Name

HILT DIANE M

Street Address (P.O. Box Number is Not Acceptable)  
344 E. ORANGE ST.

## City

ALTAMONTE SPRINGS

FL

Zip Code  
32701

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

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

(NOTE: Registered Agent signature required when reinstating)

04/26/2001

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, 2001 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

TITLE  
NAME HILT DIANE M ☐ Delete  
STREET ADDRESS 696 VENEER DR  
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME HILT DIANE M ☒ Change ☐ Addition  
STREET ADDRESS 344 E. ORANGE ST.  
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Diane M. Hilt

DP

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)