

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90109 029 ***150.00

0510941

DOCUMENT # P98000027646

1. Entity Name

TRANSPORTATION MANAGEMENT RESOURCES, INC.

Principal Place of Business

Mailing Address

~~370 W CAMINO GARDENS BLVD STE 118~~
~~BOCA RATON FL 33432~~

~~370 W CAMINO GARDENS BLVD STE 118~~
~~BOCA RATON FL 33432~~

2. Principal Place of Business

1489 W. Palmetto PK Rd

3. Mailing Address

1489 W. Palmetto PK Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

455

455

City & State

BOCA RATON FL

City & State

BOCA RATON FL

Zip

33486

Country

Zip

33486

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PEARSON, GARY

~~370 W CAMINO GARDENS BLVD STE 118~~
~~BOCA RATON FL 33432~~

7. Name and Address of New Registered Agent

Name

GARY PEARSON

Street Address (P.O. Box Number is Not Acceptable)

1489 W. Palmetto PARK Rd.

STE. 455

City

Boca Raton

FL

Zip Code

33486

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)

DATE

4/23/01

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 ☐ Delete
NAME DP
STREET ADDRESS PEARSON, GARY
CITY-ST-ZIP ~~370 W CAMINO GARDENS BLVD STE 118~~
~~BOCA RATON FL 33432~~

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME 1489 W. Palmetto Park Rd.
STREET ADDRESS Ste. 455
CITY-ST-ZIP Boca Raton FL 33486

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY S. PEARSON

4/23/01

Date

561-213-3787

Daytime Phone #

CR2E034 (10/00)