2002 UNIFORM BUSINESS REPORT (UBR)

May 07, 2002 8:00 am Secretary of State **FILED** P98000063202 DOCUMENT # 1. Entity Name VITRAN-CENTURY INVESTMENT CORP. 05-07-2002 90283 001 ***900.00 Principal Place of Business Mailing Address 13052 S.W. 133RD COURT 13052 S.W. 133RD COURT MIAMI FL 33186 MIAMI FL 33186 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 65-0865978 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee_Required -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BERTRAN, RUBEN Street Address (P.O. Box Number is Not Acceptable) 13052 S.W. 133RD COURT MIAMI FL 33186 Zip Code 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 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 PVST TITLE ☐ Delete TITLE Change | ☐ Addition BERTRAN, RUBEN NAME NAME 13052 S.W. 133RD COURT STREET ADDRESS STREET ADDRESS MIAMI FL 33186 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BERTRAN, RUBEN NAME NAME 13052 S.W. 133RD COURT STREET ADDRESS STREET ADDRESS MIAMI FL 33186 CITY-ST-ZIP CITY-ST-ZIP -- Delete --JITLE Change ☐ Addition VILLAR, LUIS NAME NAME 13052 SW 133RD CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33186 CITY-ST-ZIP ☐ Delete TITLE 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 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS 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

SIGNATURE:

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