

4/26/1999 4:15 PM

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May 10, 1999 8:00 am
Secretary of State

05-10-1999 90292 019 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P 98000073968

1. Corporation Name

H. SERRANO TRUCKING CORPORATION

Principal Place of Business 6850 NW 173RD DRIVE SUITE 107 MIAMI, FL 33015	Mailing Address 6850 NW 173RD DRIVE SUITE 107 MIAMI, FL 33015
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/24/98

4. FEI Number

65-0860608

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
 Fee Required
6. Election Campaign Financing
Trust Fund Contribution
☐ \$5.00 May Be
 Added to Fees
8. This corporation owes the current year Intangible Personal
Property Tax.
☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUMBERTO T. SERRANO
 6850 NW 173RD DRIVE
 SUITE 107
 MIAMI, FL 33015

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
 NAME HUMBERTO T. SERRANO
 STREET ADDRESS 6850 NW 173RD DRIVE #107
 CITY - ST - ZIP MIAMI, FL 33015

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE ☐ DELETE
 NAME
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 CITY - ST - ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Humberto T. Serrano HUMBERTO T. SERRANO
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/26/99 305-698-9234