2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jun 03, 2002 8:00 am Secretary of State P98000075836 DOCUMENT # 1. Entity Name KENECO TRUCKING, INC. 06-03-2002 91192 017 ***400.00 Principal Place of Business Mailing Address 301 NW 10TH STREET 301 NW 10TH STREET BELLE GLADE FL 33430 BELLE GLADE FL 33430 2. Principal Place of Business 1256 Vaughn Circle 1256 Vaughn C Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Belle Glade City & State 4. FEI Number Applied For 58-2106638 Not Applicable Country USA \$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 WRIGHT, MARY Street Address (P.O. Box Number is Not Acceptable) 301 NW 10TH STREET **BELLE GLADE FL 33430** 1256 Vaughn 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 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 -10. Election. Campaign. Financing \$5:00 May Be 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 Delete TITLE TITLE Change Wright Willie 1236 Vaughn Circle ☐ Addition WRIGHT, WILLIE C NAME STREET ADDRESS C/O 301 NW 10TH ST STREET ADDRESS CITY-ST-ZIP **BELLE GLADE FL 33430** Belle Glade, Fl. 33430 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition Wright Mary 1256 Vaughn Circle NAME WRIGHT, MARY STREET ADDRESS C/O 301 NW 10TH ST STREET ADDRESS CITY-ST-ZIP **BELLE GLADE FL 33430** CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition WRIGHT, JOSEPH NAME NAME STREET ADDRESS C/O 301 NW 10TH ST STREET ADDRESS CITY-ST-ZIP **BELLE GLADE FL 33430** CITY-ST-ZIP Belle Glade Fl. 33430 TITLE Delete TITLE WRIGHT, BRENDA NAME NAME STREET ADDRESS C/O 301 NW 10TH ST STREET ADDRESS Belle Glade Fl. 33430 CITY-ST-ZIP **BELLE GLADE FL 33430** CITY-ST-7IP ☐ Delete TITLE ☐ Addition 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 filling 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 attachagent with an address, with all other like empowered.

561-996-0976

FILED