## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Jan 28, 2000 8:00 am Secretary of State DOCUMENT # P98000091331 1. Entity Name DORAL FREIGHT INC. 01-28-2000 90112 008 \*\*\*150.00 Principal Place of Business Mailing Address 9300 N.W. 58TH ST. 9300 N.W. 58TH ST. #213 100093 MIAMI FL 33178 MIAMI FL 33178-1633 . : 2. Principal Place of Business 3. Mailing Address NW Aug. 1890 NW 82 1890 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite 105 Suite 105 Applied For City & State City & State 4. FE! Number 65-0872244 Miami Miami Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired 33126 3312<u>6</u> Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Rodriquez Marcos RODRIGUEZ, MARCOS A Street Address (P.O. Box Number is Not Acceptable) 9300 N.W. 58TH ST. 1890 82 Ave #213 NW Suite 100 **MIAMI FL 33178** Zip Code 3 3126 Miami 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. D TITLE Addition Delete TITLE Rodriquez Marcos A 1890 NW 82 Ave Suite 105 Rodriquez RODRIGUEZ, MARCOS A NAME NAME STREET ADDRESS STREET ADORESS 9300 N.W. 58TH ST. 33126 Miami, FI CITY-ST-7IP CITY-ST-ZIP **MIAMI FL 33178** ☐ Change Addition Delete TITLE TITLE Hanks, Richard HANKS, RICHARD NAME 82 Ave Suite 105 9300 N.W. 58TH ST. STREET ADDRESS 1890 Niu STREET ADDRESS FI 33126 CITY-ST-7IP CITY-ST-ZIP **MIAMI FL 33178** Miami ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITI F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE

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.

STREET ADDRESS

CITY-ST-7IP

TITLE

TITLE NAME

STREET ADDRESS

City-St-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

RUDRIGUEZ 1-24-80

☐ Change

Addition