

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90203 001 ***750.00

DOCUMENT # P9900000 3653

1. Entity Name

TRANSPORTES ZULETA, INC.



Principal Place of Business

2022 W. FLAGLER ST.
MIAMI, FL 33135

Mailing Address

6661 SW 137TH CT.
UNIT-A
MIAMI, FL 33183

2. Principal Place of Business

2022 W. FLAGLER ST

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

Zip

33135

Country

USA/DADE

Zip

Country

4. FEI Number

65-0886744

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

40161

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RAMON POWER
6661 SW 137TH CT. UNIT-A
MIAMI, FL 33183

7. Name and Address of New Registered Agent

Name

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

City

FL

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)

DATE

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 PD
NAME VALLE, HERMELINDA
STREET ADDRESS 12259 SW 17TH AVE
CITY- ST- ZIP MIAMI, FL ☒ Delete

TITLE STD
NAME VALLE, VICTOR
STREET ADDRESS 12259 SW 17TH AVE
CITY- ST- ZIP MIAMI, FL ☐ Delete

TITLE VD
NAME VALLE, HERMELINDA
STREET ADDRESS 12259 SW 17TH AVE
CITY- ST- ZIP MIAMI, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MORALES, JACQUELINE
STREET ADDRESS 18222 SW 94TH CT
CITY- ST- ZIP MIAMI, FL 33157 ☐ Change ☒ Addition

TITLE STD
NAME VALLE, VICTOR
STREET ADDRESS 18222 SW 94TH CT
CITY- ST- ZIP MIAMI, FL 33157 ☒ Change ☐ Addition

TITLE VD
NAME VALLE, HERMELINDA
STREET ADDRESS 18222 SW 94TH CT
CITY- ST- ZIP MIAMI, FL ☒ Change ☐ Addition

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

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

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

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

JACQUELINE MORALES
PRES

4/6/01
Date

305-644-1090
Daytime Phone #

CR2E034 (11/00)