

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000025220

1. Entity Name

RIG TRANSPORTERS LOGISTICS, INC.

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90096 012 ***150.00

Principal Place of Business

Mailing Address

16540 SW 101ST TERRACE
MIAMI FL 33195

16540 SW 101ST TERRACE
MIAMI FL 33195-0001

2. Principal Place of Business

3. Mailing Address

6262 S.W. 40th STREET

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3-C

City & State
Miami, FL

City & State

4. FEI Number

65-0906482

Applied For

Not Applicable

Zip

33155

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PEREZ, BEHAR & ASSOCIATES, INC.
14730 N.E. 10TH AVENUE
N. MIAMI FL 33161

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) (VICE-PRESIDENT)

(NOTE: Registered Agent signature required when reinstating)

DATE

1-5/2000

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME FIGUEROA, JESSICA L
STREET ADDRESS 16540 SW 101ST TERRACE
CITY-ST-ZIP MIAMI FL 33195

TITLE PRESIDENT ☒ Change ☐ Addition
NAME PINEDA, JESSICA L
STREET ADDRESS 16540 S.W. 101 TERRACE
CITY-ST-ZIP MIAMI, FL. 33196

TITLE VPD ☐ Delete
NAME O PINEDA, ALEXANDER O
STREET ADDRESS 16540 SW 101ST TERRACE
CITY-ST-ZIP MIAMI FL 33195

TITLE VICE-PRESIDENT ☒ Change ☐ Addition
NAME PINEDA, ALEXANDER O
STREET ADDRESS 16540 S.W. 101 TERRACE
CITY-ST-ZIP MIAMI, FL. 33196

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

(Signature) ALEXANDER PINEDA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/2000 305/861-9017

Date

Daytime Phone #