

FILED
Jul 17, 2002 8:00 am
Secretary of State

05-06-2002 90246 016 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000027587

1. Entity Name
S & D TRANSPORT INC.

Principal Place of Business

4378 PARK BLVD
PINELLAS PARK FL 33781

Mailing Address

4378 PARK BLVD
PINELLAS PARK FL 33781

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

18435, SW, 267 Str.

Suite, Apt. #, etc.

18435, SW, 267 Str.

City & State

HOME STEAD

City & State

HOME STEAD

Zip

33031

Country

FLORIDA

Zip

33031

Country

FL

4. FEI Number

59-3566219

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GAWRON, MARY

19321 C US HWY 19 NO., STE.001
CLEARWATER FL 33764

7. Name and Address of New Registered Agent

Name

R. OCH - R. O. L. O. D. 21 E

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

18435, SW, 267 Str.

City

HOME STEAD

FL

33031

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

Stau Magau

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

(NOTE: Registered Agent signature required when reinstating).

04/20/02

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, 2002 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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
STANISLAW DRAGAN
8 JUDGE ST. APT. #3
BROOKLYN NY 11211

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P. STAN DRAGAN
80-18, 57th. Str. apt # 2
Glendale, ny 11385

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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☐ Change ☐ Addition

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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: Stau Magau

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/20/02 1(917)226-2194

Date

Daytime Phone #

CR2E034 (8/01)