

2003

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

2003

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91887 016 \*\*\*150.00

**DOCUMENT #**

1. Entity Name

P99 000035473

DEVON DALEY TRUCKING, INC.



**DO NOT WRITE IN THIS SPACE**

90129335

2. Principal Place of Business

3. Mailing Address

2191 NW 98th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City &amp; State

City & State  
Sunrise, FL 333224. FEI Number  
65-0940538

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name

Devon Daley

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

2191 NW 98th Ave.

Sunrise, FL 33322

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees**10. OFFICERS AND DIRECTORS**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PRES. DIRECTOR

Devon Daley

2191 NW 98th Ave.

Sunrise, FL 33322

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Pres) Devon Daley 4/28/03  
954 Date 4-3293 Daytime Phone #

CR2E034B (12/02)