

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State
 05-11-2000 90303 034 ***150.00

DOCUMENT # P99000036953

1. Entity Name

L & L TRUCKING CORPORATION

Principal Place of Business

**841 NE 1 PLACE
 HIALEAH FL 33010**

Mailing Address

**841 NE 1 PLACE
 HIALEAH FL 33010-5102**

2. Principal Place of Business

3840 E 8TH LANE

Suite, Apt. #, etc.

3. Mailing Address

3840 E 8TH LANE

Suite, Apt. #, etc.

City & State

HIALEAH, FL

City & State

HIALEAH, FL

4. FEI Number

65-0916103

Applied For

Not Applicable

Zip

33013

Country

Zip

33013

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

**LOPEZ, RUBEN ZAYAS
 841 NE 1 PLACE
 HIALEAH FL 33010**

Name

LOPEZ, LEONARDO

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

3840 E 8TH LANE

City

HIALEAH, FL 33013

Zip Code

33013

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.

LEONARDO LOPEZ / PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

4/27/00

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, 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 **PSD** ☐ Delete
 NAME **LOPEZ, RUBEN ZAYAS**
 STREET ADDRESS **841 NE 1 PLACE**
 CITY-ST-ZIP **HIALEAH FL 33010**

TITLE **PSD** ☐ Change ☐ Addition
 NAME **LOPEZ, LEONARDO**
 STREET ADDRESS **3840 E. 8TH LANE**
 CITY-ST-ZIP **HIALEAH, FL 33013**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

LEONARDO LOPEZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00

Date

Daytime Phone #