

2001 UNIFORM BUSINESS REPORT (UBR)

1082

0430852

DOCUMENT # P99000056955

1. Entity Name
CIBAO TRUCKING, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 16 PM 12:31

Principal Place of Business
1922 ISLAND CIR
APT 204
KISSIMMEE FL 34741

Mailing Address
1922 ISLAND CIR
KISSIMMEE FL 34741



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

4. FEI Number **59-3583924**

Applied For Not Applicable

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

FLORES, MAXIMO
1922 ISLAND CIR
KISSIMMEE FL 34741

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 *Maximo Flores*

5-1-01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	FLORES, MAXIMO	
STREET ADDRESS	1922 ISLAND CIR	
CITY-ST-ZIP	KISSIMMEE FL 34741	
TITLE	V	<input type="checkbox"/> Delete
NAME	DIAZ, FRANCISCO	
STREET ADDRESS	1032 DICKENS ST	
CITY-ST-ZIP	FAX ROCKAWAY NY 11691	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

400004652694--9
-10/25/01--01030--004
***150.00 ***150.00

Maximo Flores 10/27

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: *Maximo Flores*

5-1-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

20.72

CIBAO TRUCKING, INC.

1922 ISLAND CIRCLE

#204

KISSIMMEE, FLORIDA 34741

October 11, 2001

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: 2001 Uniform Business Report
Document #P99000056955

Dear Sir or Madam:

Enclosed please find Money Order in the amount of \$150.00 for payment of the above referenced report.

I realize that this payment should have been sent by May 2001, however, I was not in the U.S. and was unable to do so. I had gone to the Dominican Republic to visit my family and fell ill while there. My family urged me to stay there through the recuperation period that ended up being several months. I am now back in the U.S. and while trying to get organized again, I found that I had not sent in the form.

I would greatly appreciate if you would take consideration of the circumstances and accept my report and payment to keep my Corporation current.

Thank you in advance for your assistance.

Sincerely,

Maximo Flores

Maximo Flores
President

OF THE STATE