

2000 UNIFORM BUSINESS REPORT (UBR)

9/15/00-90014-038-\$150.00-\$150.00

APPROVED
AND
FILED

Blatz

DOCUMENT # P99000097747

1. Entity Name

FORSYTHE'S TRANSPORT, INC.

(P)

00 SEP 27 PM 1:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00010000



DO NOT WRITE IN THIS SPACE

Principal Place of Business

7240 NW 46TH CT
LAUDERHILL FL 33319

Mailing Address

7240 NW 46TH CT
LAUDERHILL FL 33319

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0959357

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FORSYTHE, DONNA
7240 NW 46TH CT
LAUDERHILL FL 33319

7. Name and Address of New Registered Agent

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, 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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	D	<input type="checkbox"/> Delete
NAME	FORSYTHE, BRYAN	
STREET ADDRESS	7240 NW 46TH CT	
CITY - ST - ZIP	LAUDERHILL FL 33319	
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"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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		

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-10-00

Daytime Phone #

954-383-9508

681-3990

CR2E034 (5/00)

-Sent
P99000097747

A0678326's
By Cap 2

September 11, 2000

Forsythe's Transport, Inc.
7240 NW 46th Court
Lauderhill, FL 33319

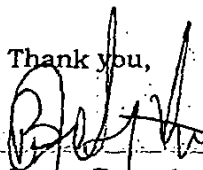
Department Of State
Division Of Corporation
Annual Reporting
P.O. Box 6327
Tallahassee, FL 32314

Re: Annual Reporting Renewal
Doc # P99000097747

Dear Sir/Madame

I spoke to your office today regarding not receiving the first notice for renewal. As per our conversation with your office. I was told to enclosed a check in the amount of \$150.00, sign documents for renewal and mail to your office as indicated on renewal form.

Thank you,


Bryan Forsythe
Forsythe's Transport, Inc.
President