

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 25, 2002 8:00 am**  
**Secretary of State**

06-25-2002 90437 004 \*\*\*150.00

DOCUMENT # **P990000098867**

1. Entity Name

**ARAN TRUCKING, INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**1870 N.W 22 AVENUE**

3. Mailing Address

**1870 N.W 22 AVE**

Suite (Apt. #, etc.)

**4**

Suite (Apt. #, etc.)

**4**

City & State

**Mia, FL**

City & State

**Mia, FL**

4. FEI Number

**65-0963672**

Applied For

Not Applicable

Zip

**33125**

Country

**Mia, Dade**

Zip

**33125**

Country

**Mia Dade**

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**Oscar A. LONZO**

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

**1870 N.W 22 AVENUE**

City

**Miami**

**FL**

Zip Code

**33125**

**DO NOT WRITE  
IN THIS SPACE**

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)

☒

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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 **P**  
NAME **Oscar A. LONZO**  
STREET ADDRESS **1870 N.W 22 AVENUE #4**  
CITY-ST-ZIP **Miami, FL 33125**

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER, DIRECTOR OR RECEIVER

Date

Daytime Phone #

**06-17-02 (786) 258-1216**

CR2E034B (12/01)

DO NOT REMOVE! Attachment  
p 9900098862

To: Division of Corporations

from: Aran Trucking Inc.

President: Oscar Alonzo.

f E I # 65-0963672.

This letter is to let you  
know I didn't receive my  
UBR for 2002, and I  
know the fee is \$150.00

I would like you please  
wave the \$400.00 fee (Late)  
Because I didn't receive the  
form this year.

Thank you.

