

2000 UNIFORM BUSINESS REPORT (UBR)

3/3/10

DOCUMENT # P99000107132

1. Entity Name

FRANIG TRANSPORT SYSTEMS, INC.

FILED
Jul 05, 2000 8:00 am
Secretary of State

03-10-2000 90037 031 ***150.00

Principal Place of Business

Mailing Address

355 WEST 63RD STREET
HIALEAH FL 33012

355 WEST 63RD STREET
HIALEAH FL 33012

2. Principal Place of Business

355 W 63 ST

3. Mailing Address

355 W 63 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Hialeah FL

City & State

Hialeah FL

4. FEI Number

65-0970059

Applied For

Not Applicable

Zip

33012

Country

Dade

Zip

33012

Country

Dade

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

IGLESIAS, FRANCISCO
355 WEST 63RD STREET
HIALEAH FL 33012

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 fee if applicable

(NOTE: Registered Agent signature required when reappointing)

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
NAME
STREET ADDRESS
CITY-ST-ZIP

OWNER
Francisco Iglesias
355 W 63 ST.
Hialeah FL 33012

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

Francisco Iglesias

Date

Daytime Phone #

6/26/00

305 512 8737