

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Jun 09, 2000 8:00 am**  
**Secretary of State**

06-09-2000 90032 042 \*\*\*550.00

**DOCUMENT # V02586**

1. Entity Name

**ADVANCE CARGO OF ORLANDO, INC.**

Principal Place of Business

9043 TRADEPORT DRIVE  
ORLANDO FL 32827  
US

Mailing Address

9043 TRADEPORT DR  
ORLANDO FL 32827-5373  
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

**100 N. Biscayne Blvd.**

Suite, Apt. #, etc.  
**#2608**

City & State  
**Miami, FL**

Zip

**33132**

Country

**USA**

4. FEI Number

**65-0304837**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GUTHRIE, REX B.**  
**4950 S.E. FINANCIAL CENTER**  
**200 SO. BISCAYNE BLVD.**  
**MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name

**Jeffrey A. Bernstein**

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

**100 N. Biscayne Blvd.**

**Suite 2608**

City

**Miami**

**FL**

Zip Code  
**33132**

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)

**6/2/00**  
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HART, CLYDE</b> <b>116 STROMBOLE DRIVE</b> <b>ISLAMORADA FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>JARMAN, ROGER D</b> <b>1110 ROBIN AVENUE</b> <b>MIAMI SPRINGS FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HAMILTON, Charles</b> <b>100 N. Biscayne Blvd. #2608</b> <b>Miami, FL 33132</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SPERRY, Gillis</b> <b>100 N. Biscayne Blvd. #2608</b> <b>Miami, FL 33132</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D/P/T/VP/S</b> <b>CALVINO, Sal</b> <b>100 N. Biscayne Blvd., #2608</b> <b>Miami, FL 33132</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

**Charles Hamilton**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Charles Hamilton**

Date

**6/31/00**

Daytime Phone #

**603-669-3198**

CR2E034 (9/99)