## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 14, 2001 8:00 am **DOCUMENT # V05202** Secretary of State 1. Entity Name A & J TRANSPORT SYSTEMS CORPORATION 02-14-2001 90020 047 \*\*\*150.00 Principal Place of Business Mailing Address 2088 S.W. 138TH CT. 2088 S.W. 138TH CT. MIAMI FL 33175 MIAMI FL 33175 U & & 4 J 4 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0305446 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DE OCA, YAMILE MONTES Street Address (P.O. Box Number is Not Acceptable) 2088 S.W. 138TH CT. **MIAMI FL 33175** City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition President ' CRESPO, MIRTA NAME NAME Yamile Montes de Oca 9723 N.W. 2ND STREET STREET ADDRESS STREET ADDRESS 2088 S.W. 138th Court CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Miami, Fl. 33175 Delete TITLE ☐ Change Addition TITLE DE OCA, YAMILE M NAME NAME 2088 SW 138TH CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP MIAMI FL TITLE Delete ☐ Change ★ Addition TITLE" Vice President NAME NAME Rolando Montes de Oca STREET ADDRESS STREET ADDRESS 2088 S.W. 138th Court CITY-ST-ZIP CITY-ST-ZIP Miami, Fl. 33175 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ 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 artist true with all other like empowered.

NAME

TITLE

NAME

☐ Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

**SIGNATURE** 

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

Montes de Oca

305-229-0568

Daytime Phone #

☐ Change

Addition

0001) +001310