2002 UNIFORM BUSINESS REPORT (UBR)

Jun 25, 2002 8:00 am Secretary of State V39070 **DOCUMENT #** 05-27-2002 90480 017 ***150.00 1. Entity Name BLUE LINE EXPRESS AUTO TRANSPORT, CORP. Principal Place of Business Mailing Address 925 HUNTING LODGE DRIVE 925 HUNTING LODGE DRIVE MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0335301 Not Applicable 7io Zip Country 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 HERNANDEZ, JOAQUIN Number in Not Acceptable) Street Add 1780 WEST 2ND AVE. HIALEAH FL 33010 8. The above n the State of Florida. med entity submits this state for the purpose of changing its registered office or registered ager SIGNA FILE NOW!!! FEE IS \$150.00 rporation 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. /CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ADDITIONÉ (9/01) TITLE Delete TITLE 5100 HERNANDEZ, JOAQUIN NAME NAME 1780 WEST 2ND AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33010 CITY-ST-ZIP TITLE TITLE ☐ Addition **Delete** VILLAVICENCIO, GUILLERMI NAME NAME 1780 WEST 2ND AVE. STREET ADDRESS STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIE C(TY+ST-7)2 TITLE Delete? TITLE" ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP ☐ Delete IME ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of 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 a

SIGNATUR

FILED