

2000 UNIFORM BUSINESS REPORT (UBR)

1819

DOCUMENT # P99000020174

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 OCT -9 PH 1:02

1. Entity Name
SOUTHERN EXPRESS TRUCKING INC.

Principal Place of Business 2477 G ROAD LOXAHATCHEE FL 33470	Mailing Address 2477 G ROAD LOXAHATCHEE FL 33470
--	--



2. Principal Place of Business 14462 83 LANE NORTH Suite, Apt. #, etc.	3. Mailing Address 6701 MALLARDS COVE ROAD APT # 7-C Suite, Apt. #, etc.
--	---

DO NOT WRITE IN THIS SPACE 0128100 90150 028 180

City & State ROYAL PALM BEACH, FL	City & State JUPITER, FL	4. FEI Number 65-0898665	Applied For Not Applicable
Zip 33412	Country P.B. Co.	Zip 33458	Country P.B. Co.

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BOULEVARD #211
PALM BEACH GARDENS FL 33418

7. Name and Address of New Registered Agent
Name: **GILBERTO BOTANA**
Street Address (P.O. Box Number is Not Acceptable):
14462 83 LANE NORTH
City: **ROYAL PALM BEACH FL** Zip Code: **33412**

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: *Gilberto Botana*
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)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	D BOTANA, DILBERTO A 2477 G ROAD LOXAHATCHEE FL 33470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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
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: *Gilberto Botana* Date: **7-28-00** (561)-746-0515

CR 2004 1507

Attachment #999000020174

July 28, 2000

pg 2 of 2

HERE IS MY COPY OF MY RECEIPT FOR \$150⁰⁰
AS I SENT IT IN JANUARY. I'M SORRY I DIDN'T
RECEIVE YOUR CORRESPONDENCE IN FEBRUARY
COULD YOU PLEASE SEE THAT THIS MATTER IS
TAKEN CARE OF. IF YOU HAVE ANY QUESTIONS
PLEASE GIVE ME A CALL AT (561) 746-0515.

THANK YOU.

John to Brian