

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000063849

Entity Name: D & L REMOVAL AND TRANSPORT INC.**Current Principal Place of Business:**1640 S. SALFORD BLVD.
NORTH PORT, FL 34287**Current Mailing Address:**1640 S. SALFORD BLVD.
NORTH PORT, FL 34287 US**FEI Number:** 26-3015001**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
320 S. FLAMINGO ROAD
347
PEMBROKE PINES, FL 33027 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	KAUFMAN, RICHARD NSR.
Address	1640 S. SALFORD BLVD.
City-State-Zip:	NORTH PORT FL 34287

Title	S, D
Name	TAGTOW, DOROTHY R
Address	1640 S. SALFORD BLVD.
City-State-Zip:	NORTH PORT FL 34287

Title	T, D
Name	KAUFMAN, CONNIE L
Address	1640 S. SALFORD BLVD.
City-State-Zip:	NORTH PORT FL 34287

Title	VP
Name	TAGTOW, LESTER G
Address	1640 S. SALFORD BLVD.
City-State-Zip:	NORTH PORT FL 34287

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD KAUFMAN N SR.**PRESIDENT****01/20/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date