

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000036620

**Entity Name:** PM TRANSPORT OF FLORIDA, INC.

**Current Principal Place of Business:**

19995 SW 194 AVENUE  
GOULDS, FL 33187

**Current Mailing Address:**

21800 SW 162 AVE  
MIAMI, FL 33170 US

**FEI Number:** 65-0925926

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CABRERA, ARIANNA M  
21800 SW 162 AVE  
MIAMI, FL 33170 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 D, P  
Name SMITH, JOSE I. III  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170

Title D, VP, T  
Name COSTA, JOSE A. III  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170

Title D, VP, S  
Name SMITH, MARIA COSTA  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170

Title D  
Name SUAREZ, MARGARITA COSTA  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170

Title D  
Name COSTA, EDUARDO  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170

Title D  
Name STROUSE, ROBERT  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170

Title D  
Name GREENE, GREG  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170

Title D  
Name WOOD, JIM  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170

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*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:** JOSE I SMITH

**DIRECTOR**

01/10/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name BLOOMQUIST, DE LYLE  
Address 21800 SW 162 AVE  
City-State-Zip: MIAMI FL 33170