

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 470253 (6)
 1. Corporation Name
ECONOCARIBE TRUCKING INC.



Principal Place of Business 2401 NW 69TH ST MIAMI FL 33147	Mailing Address 2401 NW 69TH ST MIAMI FL 33147
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/20/1975	
21 Suite, Apt #, etc.	22 City & State	23 Zip	24 Country	25	26
4. FEI Number 59-1627900		Applied For		Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SYKES, HARVEY 1757 WEST 62ND STREET HIALEAH FL 33012				81 Name	SYKES, HARVEY		
				82 Street Address (P.O. Box Number is Not Acceptable)	1230 WILSHIRE CIRCLE EAST		
				83			
				84 City	PEMBROKE PINES,	FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent Signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VD	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	STD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	SARDUY, GERARDO			1.2 NAME	OFFEN, EMANUEL		
STREET ADDRESS	1213 NW 125 TERRACE			1.3 STREET ADDRESS	2333 BRICKELL AVE.		
CITY-ST-ZIP	SUNRISE FL			1.4 CITY-ST-ZIP	MIAMI, FLA. 33129		
TITLE	TD	<input checked="" type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BELUSIC MARCO			2.2 NAME			
STREET ADDRESS	18843 NW 78 PLACE			2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			2.4 CITY-ST-ZIP			
TITLE	SD	<input checked="" type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SARDOY, PAUL			3.2 NAME			
STREET ADDRESS	7601 E TREASURE DR			3.3 STREET ADDRESS			
CITY-ST-ZIP	N. BAY VILLAGE FL			3.4 CITY-ST-ZIP			
TITLE	PD	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	PD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SYKES, HARVEY			4.2 NAME	SYKES, HARVEY		
STREET ADDRESS	1757 WEST 62ND ST.			4.3 STREET ADDRESS	1230 WILSHIRE CIRCLE EAST		
CITY-ST-ZIP	HIALEAH FL			4.4 CITY-ST-ZIP	PEMBROKE PINES, FLA. 33027		
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE *Harvey Sykes* **HARVEY SYKES, PRES. 4/20/98 305-693-5133**

CR2034 (10/97)