SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

(8)

WAREHOUSE DIVISION OF WORLD TERMINAL AND DISTRIB **UTING CORPORATION**

FILED Jul 18 1997 8:00am Secretary of State



• • • • • • • • • • • • • • • • • • • •														
Principal Place of Business Mailing Address								\dashv		I BIBEL UIDEL				
6996 N W 25 STREET P O BOX 522631 Mimai Fl 33152				6998 N W 25 STREET P O BOX 522631 MIMAI FL 33152				DO NOT WRITE IN THIS SPACE						
									3. Date Incorporated or Qualified	3a. Da			eport	
						.	03/08/1977 04/11/1996					_		
2. Principal Place of Business				2a, Mailing Address				4. FEI Number		-	_ -	plied For	4	
Sulte, Apt. #, etc.				26 Suite And # ole			-	59-1760190 Not Applica					4	
22				Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required					
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip	Zip Country					untry		ļ	8. This corporation owes or has pai				angible	
24			29			,			Personal Property Tax due June 30. Yes No					
	d Address of Currer	nt Regis	stered Agent		227		1	10. Name and Address of New Reg	Address of New Registered Agent					
	az, lazaro f					81	Name							
780 N.W. 42ND AVE., STE. 621 Miami Fl 33126						82	Street Ad	eet Address (P.O. Box Number is Not Acceptable)					1	
						83								1
						84	City			FL	85	Zip (Code	1
office or r	registered agen	 or both, in the State 	of Flori	807.1508, Florida Statul ida. Such change was if, Section 607.0505, Fl	authorized	d by	the corpor	orpora ration'	ition submits this statement for the p is board of directors. I heroby accep	urpose of t the appo	chan ointme	ging its ent as	s registered registered	
SIGNATURE	Stonature, typed or r	punted pario of registered ago	ent end little	e f applicable (NO)	E. Registore	d Age	oril & gnature req	nJired w	her renstation	DATE				
12.		OFFICERS AN	D DIRE	CTORS	13.	•			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRE	CTOR	S IN 12	76
TITLE	D			DELETE	1.1 10	TL E					☐ Cr	ange	Addition	1
NAME	GAZITUA, L. R.			1.2 N		\ME								;
STREET ADDRESS				1.3 \$.3 STREET ADDRESS								}
CITY-ST-ZIP	MIAMI FL				1.4 CI	ĭY∙S	(T- Z)P							}
TITLE	D			DELETE	2.1 TI	TLE					☐ C	ange	Addition	7
NAME	GAZITUA, RALPH L.			2?		2 2 NAME								1
STREET ADDRESS	ADDRESS 13600 S.W. 103RD PLACE				2.3 \$1	2.3 STREET ADORESS								Ţ
CITY-ST-ZIP	SOUTH MI	iami fl			2.40	NY-5	ST-ZIP							
TITLE	PD			DELETE	3.1 Til						C	ange	Addition	7
NAME	MARTINEZ, ENRIQUE			3.2		3.2 NAME				•				
STREET ADDRESS				3.3		3.3 STREET ADDRESS								
CITY-ST-ZIP	MIAMI LAK	KE FL			3.4. 0	ITY-S	ST-ZIP							1
TITLE	D			□ DELETÉ	4.1 TI	TLE						ange	Addition	7
NAME	PRATS, RA				4.2 N	AME								
STREET ADDRESS				4.33		1.3 STREET ADDRESS								
CITY-\$1-ZIP	MIAMI FL				4.4 CI	1Y-S	I - 71P							
TITLE			•			TITLE					Cr	ange	Addition	
NAME				. 5.2 N		NAME								
STREET ADDRESS	1			5.3 \$		IREET ADDRESS								İ
CITY - ST - ZIP					5.4 CI	<u>1Y</u> - S	T-ZIP							
TITLE				DELETE	6.1 10	ΙLÉ					C	ange	Addition	1
NAME					6.2 NA	₩.E								1
STREET ADDRESS	1				6.3 \$1	REE 1	ADDRESS							
CITY-ST-ZIP	<u> </u>				6.4 CI	1Y-S	T - ZIP							

do 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 annual poort 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 control or the certify it empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 schanged, or on an etter ment with an address.