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527201

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Annual Report  
Filed 4-21-95

2 pgs.

**FILE NOW: FILING FEE AFTER MAY THIS \$225.00**

**CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

**APPROVED AND FILED**  
 95 APR 21 AM 9:20  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # 527201 (8)**  
 1. Corporation Name  
**WAREHOUSE DIVISION OF WORLD TERMINAL AND DISTRIBUTING CORPORATION**

Principal Place of Business Mailing Address  
 6998 N W 25 STREET 6998 N W 25 STREET  
 P O BOX 522631 P O BOX 522631  
 MIAMI FL 33152 MIAMI FL 33152

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For:
21		26		59-1760190	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		8. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May be Added to Fees	
City & State		City & State		9. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24	25	29	30		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CORPORATION COMPANY OF MIAMI 1000 S.E. 1ST NAT'L BANK BLDG. MIAMI FL				B1 Name			
				B2 Street Address (P.O. Box Number is Not Acceptable)			
				B3			
				B4 City FL B5 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAZTUA, L. R.	1.2 NAME	
STREET ADDRESS	2333 BRICKELL AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAZTUA, RALPH L.	2.2 NAME	
STREET ADDRESS	13600 S.W. 103RD PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	PD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTINEZ, ENRIQUE	3.2 NAME	
STREET ADDRESS	6340 PENT PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKE FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRATS, RAMON	4.2 NAME	
STREET ADDRESS	3010 S.W. 108TH COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE		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		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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(a), 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, changed, or on an attachment with an address.

SIGNATURE: *Enrique Martinez* 4-17-95 305-592-4427  
 ENRIQUE MARTINEZ President