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

FILED May 21 1998 8:00am **PROFIT** FLORIDA DEFIARTMENT OF STATE CORPORATION Sandra B. Mostham. Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L95806 (0) C. J. FREIGHT, INC. Principal Place of Business Mailing Address ANGOHVARÓ AS ÁMSTÁN RICHARD & AUSTIN /6360/N/W/ 5390/SY./ latuóukg/ básó,ki,xv/sarró,ét/ DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/23/1990 2a. Mailing Address 26 P.O. P.O Applied For 65-0215518 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent angdh/bighard r 🔻 81 ,8396 MW ,5380,57 82 STE/300 83 MAIM,FV 33/198/ **RESIGNED 4/1/98 City Miame 84 h02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered gallons of, Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of Sections 607 office or registered agent, or both, in the agent. I am familiar with rand accept the a SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TITLE 1.1 TITLE MENA, GRETA NAME 1.2 NAME 13473 SW 30TH ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE DVST -2.1 TITLE Addition JORGE, MARIA 2.2 NAME NAME 13473 SW 30TH ST STREET ADDRESS 2 3 STREET ADDRESS Miami FL CITY-ST-ZIP 2. 4 CHTY - ST - Z(P **S-**P-D-T DELETE Change Addition 3.1 TITLE TITLE JORGE, CHARLES NAME 3.2 NAME **13473 SW 30 STREET** STREET ADORESS 3.3 STREET ADDRESS miami fl CITY-ST-ZIP 3.4 CITY-ST-7IP TITLE ** Resigned as D/P/T DELETE 4.1 TITLE Change Addition as of March 20, 1998 NAME 4. 2 NAME *** Became D/P/T as of 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP March 20, 1998 DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 CITY - S1 - ZIP 14. Thereby certify that the information supplied with this filling closs not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; that I am an officer or director of the corporation or the feeciver 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 change