

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

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Apr 09 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P05909 (7)
1. Corporation Name
SCAC TRANSPORT (USA), INC.



Principal Place of Business Mailing Address
BLDG. 75. N. HANGAR ROAD BLDG. 75. N. HANGAR ROAD
JAMAICA NY 11430 JAMAICA NY 11430

3. Date Incorporated or Qualified 05/06/1985 3a. Date of Last Report 01/26/1996
4. FEI Number 13-2635593 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 7172 North West 50th 26
Suite Apt #, etc. Suite, Apt #, etc.
22 City & State 27 City & State
23 Miami FL 28
Zip 33166 Country USA 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VIDAL, JACQUES MICHAEL
6990 N.W. 50TH STREET
MIAMI FL 33166
→ 7172 North West 50th St.
Miami FL 33166

81 Name Vidal, Jacques Mich e l
82 Street Address (P.O. Box Number is Not Acceptable) 7172 North West 50th St.
83
84 City Miami FL 85 Zip Code 33166

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DELVA, DANIEL	1.2 NAME	Steinbock, Eric
STREET ADDRESS	30, QUAI DE DION BOUTON	1.3 STREET ADDRESS	501 Forbes Blvd. - suite 100
CITY-ST-ZIP	FRANCE	1.4 CITY-ST-ZIP	South San Francisco CA 94080
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LUCAS, FRANCOIS	2.2 NAME	ASST. Secretary
STREET ADDRESS	30, QUAI DE DION BOUTON	2.3 STREET ADDRESS	Wei Mei Chow
CITY-ST-ZIP	FRANCE	2.4 CITY-ST-ZIP	BLDG 75 N. Hangar Rd Jamaica NY 11430
TITLE	P <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DE POUILLY, JEAN	3.2 NAME	ASST. Secretary
STREET ADDRESS	9133 LA CIENEGA BLVD	3.3 STREET ADDRESS	Liang, Philip
CITY-ST-ZIP	INGLEWOOD CA 90301	3.4 CITY-ST-ZIP	9133 La Cienega Blvd Inglewood CA 90301
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COUSTAR, PASCAL	4.2 NAME	
STREET ADDRESS	9133 LA CIENEGA BLVD. #250	4.3 STREET ADDRESS	
CITY-ST-ZIP	INGLEWOOD CA 90301	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERNACKI, PETER	5.2 NAME	
STREET ADDRESS	BLDG 75 N HANGAR RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	JAMAICA NY 11430	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 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 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: [Signature] SIGNATURE REQUIRED DATE: 7/8 656-8100 DAYTIME PHONE: #

CR2E034 (9/96)