

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000000246 (6)**

1. Corporation Name

C.B.I. CUSTOMS BROKERS, INC.



Principal Place of Business

**2550 NW 72ND AVE.
MIAMI FL 33122**

Mailing Address

**2550 NW 72ND AVE.
MIAMI FL 33122**

3. Date Incorporated or Qualified
01/03/1994

3a. Date of Last Report
08/25/1995

2. Principal Place of Business

21

Suite, Apt #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

2550 NW 72nd Ave

Suite, Apt #, etc.

27

#309

City & State

28

MIAMI, FL

Zip

29

3122

Country

30

USA

4. FEI Number
65-0457660

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

9. Name and Address of Current Registered Agent

**PEROZO, ANDRE
2550 NW 72ND AVE. #309
MIAMI FL 33122**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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

Signature: Type in printer name of the registered agent and the date of filing

Signature: Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

TITLE

PT

DELETE

NAME

**PEROZO, ANDRE
2550 NW 72ND AVE.
MIAMI FL 33122**

STREET ADDRESS

CITY - ST - ZIP

TITLE

VP

DELETE

NAME

**FOLLMER, ROBERT C
2914 NE LOQUAT LANE
JENSEN BEACH FL 34957**

STREET ADDRESS

CITY - ST - ZIP

TITLE

S

DELETE

NAME

**PEROZO, YOCASTA
2550 NW 72ND AVE.
MIAMI FL 33122**

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

Change Addition

6.2 NAME

6.3 STREET ADDRESS

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(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDRE PEROZO

7/23/96 (305) 599-1478

CR2E034 (12/95)