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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State. * **DIVISION OF CORPORATIONS**

1998

DOCUMENT # P97000012533 (0)

FILED Mar 31 1998 8:00am Secretary of State

1. Corporatio	CAN FAST CARGO WORL	DWIDE, INC.			
Principal Place of Business Mailing Address				3 TORNIOON LIN TONIS ABOUT	-
7207 NW 54 STREET 7207 NW 54 STREET MIAM FL 33166 MIAM FL 33166				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				02/11/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For Not Applied For Not Applied For	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•	5. Certificate of Status Desired S8.75 Additional Fee Required	
22 City & Stat	0	City & State			
23	•	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	\neg
24	25		30	Personal Property Tax due June 30. 🔲 Yes 🔲 No	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agent	
	NEGAS, JORGE		81 Name		
7207 NW 54 STREET			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
Mi	AM FL 33166		63		\dashv
			84 City	85 Zip Code	\dashv
	_			FL I''	
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	s, the above-named o	corporation submits this statement for the purpose of changing its register oration's board of directors. I hereby accept the appointment as registere	red
agent. I a	im familiar with, and accept the obli	igations of, Section 607.0505, Flor	rida Statutes.	oralions board of directors, thereby accept the appointment as registere	"
SIGNATURE					_
12.	Signature, typed or printed name of registered a	agent and title if applicable (NOTE: ND DIRECTORS	Registered Agent signature re	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE	Change Addi	lition
NAME	VENEGAS, JORGE		1.2 NAME		
STREET ADDRESS	7207 NW 54 STREET		1.3 STREET ADDRESS	•	
CITY-ST-ZIP	MIAM FL 33166		1.4 CITY-ST-ZIP		i
TITLE	VSD	DELETE	2.1 TITLE	☐ Change ☐ Addi	iition
NAME	\$OLER, ANGEL		2.2 NAME		
STREET ADDRESS	7207 NW 54 STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAM FL 33166		2. 4 CITY - ST - ZIP		
TITLE	-	☐ DELET E	3.1 TETLE	Change Addi	ition
NAME			3.2 NAME		
STREET ADDRESS			3,3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP	☐ Change ☐ Addi	lition
TITLE	۸	□ nerest	4.1 TITLE		ICIUIT
NAME Street address i			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP	! !\ . \		4.4 CITY-ST-ZIP		ļ
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addi	lition
NAME			5.2 NAME	_ , <u>_</u>	
STREET ADDRESS		\	5.3 STREET ADDRESS		
CITY-ST-ZIP		. []	5.4 CITY - ST - ZIP		ļ
TITLE		DELETE	6.1 TITLE	Change Addi	ition
NAME	/ / / / / / / / / / / / / / / / / / /	. / II	6.2 NAME		ŀ
STREET ADDRESS	(12.2	6.3 STREET ADDRESS		
CITY-ST-ZIP	Museum	BINDE	6.4 CITY - S1 - ZIP		
14. Thereby o	ertify that the information supplied	with this filing does not dualify for	the exemption stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the informati	ion

indicated on this annual report or supplemental annual resort 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 trustine empoweded 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 attactment within address.