

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

CORPORATION,
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JANIS B. MOFFATT
Secretary of State
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

DOCUMENT # **V50311 (2)**
M. V. P. INTERNATIONAL FREIGHT SYSTEMS, INC.

05 MAY 1995 17:10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Location 2650 N.W. 74TH AVENUE MIAMI FL 33122		Mailing Address 2650 N.W. 74TH AVENUE MIAMI FL 33122		DO NOT WRITE IN THIS SPACE	
3. Date of Incorporation or Reincorporation 07/06/1992		3a. Date of Last Report 01/24/1994		4. FET Number 65-0350604	
2. Principal Office Location 21		2a. Mailing Address 26		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
22. State of Incorporation 22		27. State of Mailing 27		6. Election Campaign Financing Federal Fund Contribution ☐ \$5.00 May Be Added to Fees	
23. City and State 23		28. City and State 28		8. The corporation has liability for intangible tax under Fla. Statutes ☐ Yes ☒ No	
24. Country 24		25. Country 25		29. Country 29	
26. Country 26		30. Country 30		31. Country 31	
9. Name and Address of Current Registered Agent PALACIOS, GLORIA 3741 N.W. 66TH AVENUE MIAMI FL 33166				10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City, State, Zip FL 85. Zip Code	
11. I, the undersigned, the president of the corporation, do hereby certify that the above named corporation is a corporation organized under the laws of the State of Florida. I hereby accept the appointment as registered agent for the corporation and accept the obligations of the law of the State of Florida. I hereby accept the appointment as registered agent for the corporation and accept the obligations of the law of the State of Florida.					
12. OFFICERS AND DIRECTORS					
13. ADDITIONAL CHANGES TO THE CHARTER AND BYLAWS					
14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not equally for this reporting stated in the law of the State of Florida. I further certify that the information included 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 registered agent or authorized representative of the corporation 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 registered agent or authorized representative of the corporation and that my signature shall have the same legal effect as if made under oath.					

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

5/05/95 599-9099

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

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
Office of the Secretary
Tallahassee, Florida
32399-0001

DOCUMENT # **V50500**

(0)

AUSTIN & LOMBARDI, INC.

RECEIVED
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/09/1992		3a. Date of Last Report 04/19/1994	
4. FEI Number 65-0350201		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(1)(c), Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LOMBARDI, RICHARD V. 6602 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.01(1) and 607.01(2), 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.01(3), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Signature of New Registered Agent or Director

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
1. NAME	D LOMBARDI, RICHARD V.	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	6602 GULF OF MEXICO DR.	2. STREET ADDRESS	
3. CITY AND ZIP	LONGBOAT KEY FL	3. CITY AND ZIP	
4. NAME	D LOMBARDI, ELAINE A.	4. NAME	☐ Change ☐ Addition
5. STREET ADDRESS	6602 GULF OF MEXICO DR.	5. STREET ADDRESS	
6. CITY AND ZIP	LONGBOAT KEY FL	6. CITY AND ZIP	
7. NAME		7. NAME	☐ Change ☐ Addition
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY AND ZIP		9. CITY AND ZIP	
10. NAME		10. NAME	☐ Change ☐ Addition
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY AND ZIP		12. CITY AND ZIP	
13. NAME		13. NAME	☐ Change ☐ Addition
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY AND ZIP		15. CITY AND ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law from 199(1)(c), Florida Statutes. I further certify that the information included 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block A of Block 13 of this report or on any affidavit filed with an address.

SIGNATURE

Richard V. Lombardi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RICHARD V. LOMBARDI

5-7-95 813-383-1222

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

SECRETARIAT,
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # V50501

(8)

For Corporate Report

THE LOMBARDI GROUP, INC.

15 MAY 11 1995 25

RECEIVED
TALLAHASSEE, FLORIDA

1. Principal Office (City & State)		2a. Mailing Address		3. Date incorporated or Qualified		3a. Date of Last Report	
6602 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228		6602 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228		07/09/1992		04/19/1994	
2. Principal Office (City & State)		2a. Mailing Address		4. FEI Number		Applied For	
21. Date Applied		26. Date Applied		65-0350210		Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required ☐ \$5.00 May Be Added to Fees	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees ☐ No	
24. City		25. City		29. City		30. City	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LOMBARDI, RICHARD V. 6602 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83. City			
				84. State			
				85. Zip Code			
11. Pursuant to the provisions of Sections 609.01 and 609.02, 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. For this change was authorized by the corporation's board of directors, I hereby accept this appointment as registered agent. I am a natural citizen and accept the stipulations of Section 609.02, Florida Statutes.							

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	D LOMBARDI, RICHARD V. 6602 GULF OF MEXICO DR. LONGBOAT KEY FL	NAME	Change Add
NAME	D LOMBARDI, ELAINE A. 6602 GULF OF MEXICO DR. LONGBOAT KEY FL	NAME	Change Add
NAME		NAME	Change Add
NAME		NAME	Change Add
NAME		NAME	Change Add
NAME		NAME	Change Add
NAME		NAME	Change Add
NAME		NAME	Change Add
NAME		NAME	Change Add

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 609.02(b)(1), Florida Statutes. Further, I certify that the information indicated on this annual report or supplementary 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 609, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Richard V. Lombardi* Pres.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 RICHARD V. LOMBARDI
 5-8-95 813-388-1232
 0348623 CP