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

Feb 18 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** 367606 (1)AIRCARGO BROKERAGE CO. Principal Place of Business Mailing Address 2541 NW 72ND AVE. 2541 NW 72ND AVE. MIAMI FL 33122 MIAMI FL 33122 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/29/1970 4, FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1301941 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Ζφ Country 8. This corporation owes or has paid the current year Intangible ☐ Yes □ Ño 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SILVERS, BARRY 2541 NW 72ND AVE. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33122** 83 В4 City 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** Stignature, typoid or product narror of requirered a pent and little of apple able (NOTE Hagistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change 1.5 TITLE TITLE SILVERS, BARRY 12 NAME NAME 1408 S. BAYSHORE DR., APT. 1405 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33131 1.4 CITY-ST-ZIP CITY-\$1-ZIP DELETE Change Addition TITLE 21 TITLE HENNEGAN, GLENN NAME 2.2 NAME 20520 LEEWARD LN. STREET ADDRESS 23 STREET ADDRESS MIAMI FL 33189 CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition TITLE 3 1 TITLE SCHWAM, EUGENE NAME 3.2 NAME 845 NE 178 ST. STREET ADDRESS 33 STREET ADDRESS **NORTH MIAMI BEACH FL 33162** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ■ Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS

64 CITY-ST-ZIP

14. I horeby 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 type 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 conjugation or the receiver or trust employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 it changed, or an attachaged with an address.

4.4 CITY-S1-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5,4 CITY - ST - ZIP

5 1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

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SIGNATURE:

CHY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME

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BARRY SILVERS PRES

2-12-98

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Change

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