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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FUORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # 381652 TWIN TERMINAL SERVICES, INC.

(7)

FILED May 02 1997 8:00am Secretary of State

Zip Code

| Principal Place of Business 7007 NW 30 ST MIAMI FL 33122 | | Mailing Address 7007 NW 30 ST MIAMI FL 33122-1328 | | | | | | |
|--|-------------------|---|----|----------|---|--|-----------------------------------|-------------------------------|
| | | | | | | 3. Date Incorporated or Qualified 05/05/1971 | | Date of Last Report 5/01/1996 |
| 2. Principal | Place of Business | 2a. Mailing Address | | | 4. FEI Number | | Applied For | |
| 21 | | 26 | | | 59-1581186 | 59-1581186 Not Applicable | | |
| Suite, Ap | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | |
| City & State | | Cily & Slale | | | Election Campaign Financing Trust Fund Contribution | F | | |
| Zip 24 | Country 25 | 7ip [29] | 30 | ountry | | 8. This corporation has liability for intangible tax under s. 199,032, f lorida Statutes | | |
| g, Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | | |
| AREVALO, FRANK 800 N.W. 29TH AVE. MIAMI FL 33125 | | | | 81 82 | | | | |

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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, typed or printed name of regularity dispersions the lift applicable (NOTE: Hegistered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE $1.1\,\mathrm{He}$ Change Addition AREVALO, FRANK NAME 1.2 NAME 800 N.W. 29TH AVE. STREET ADDRESS 13 STREET ADDRESS MIAMI FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE Change 21 TITLE Addition AREVALO, RICARDO NAME 2.2 NAME 800 N.W. 29TH AVE STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL** CITY-ST-ZIP 2 # C/TY-ST-ZIP DELETE TITLE 3.1 TITLE Change ___ Addition AREVALO, FRANK JR. NAME 3.2 NAM6 800 N.W. 29TH AVE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4 CITY - ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. P NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-7IP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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

ment with n address.