

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morvrum Secretary of State DIVISION OF CORPORATIONS
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**FILED**  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

95 APR -4 AM 11:39

DO NOT WRITE IN THIS SPACE

**DOCUMENT # 473862 (1)**

1. Corporation Name  
**CENTRAL FREIGHT FORWARDING, INC.**

Principal Place of Business 5459 N.W. 72 AVE. P.O. BOX 01-4936 MIAMI, FL 33101 MIAMI FL 33166	Mailing Address 5459 N.W. 72 AVE. P.O. BOX 01-4936 MIAMI, FL 33101 MIAMI FL 33166
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3. Date Incorporated or Qualified <b>04/09/1975</b>	3a. Date of Last Report <b>02/28/1994</b>
4. FEI Number <b>59-1649001</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent\*

**ESTRADA, AIDA**  
**5459 N.W. 72 AVE.**  
**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	<b>FL</b>
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>VD</b>	<b>ESTRADA, TERESA</b> 5459 N.W. 72 AVE. MIAMI, FL 33122	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>PD</b>	<b>ESTRADA, AIDA</b> 5459 N.W. 72 AVE. MIAMI, FL 33122	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>STD</b>	<b>ESTRADA, AURELIO</b> 5459 N.W. 72 AVE. MIAMI, FL 33122	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information provided with this filing is voluntarily furnished and I am not eligible for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 appointed to complete this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if completed, or on an attachment, with or without reference.

SIGNATURE: \_\_\_\_\_ (Signature of Registered Agent)  
 Date: \_\_\_\_\_