

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

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # 473862

1. Corporation Name
CENTRAL FREIGHT FORWARDING, INC.

Principal Place of Business: 5459 N.W. 72 AVE, MIAMI, FL 33166
 Mailing Address: 5459 N.W. 72 AVE, MIAMI, FL. 33166-4223

2. Principal Place of Business (21) State, Apt. #, etc. (22) City & State (23) Zip (24) Country (25) Country

2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) City & State (29) Zip (30) Country

FILED
 JUN 20 1999 9:26
 MIAMI

REINSTATEMENT 9899

3. Date Incorporated or Qualified: 04/09/1975

4. FEI Number: 59-1649001 (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 owes the current year intangible Personal Property Tax: Yes No

9. Name and Address of Current Registered Agent: ESTRADA, AIDA, 5459 N.W. 72ND AVE, MIAMI, FL. 33166

10. Name and Address of New Registered Agent: (81) Name (82) Street Address (83) City (84) City (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 of 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 607.0605, Florida Statutes.

SIGNATURE: *Aida Estrada* DATE: 6-8-99

12. OFFICERS AND DIRECTORS

11 TITLE: VD [] DELETE
 12 NAME: CHOMAT, TERESA
 13 STREET ADDRESS: 10135 SW 14 CT.
 14 CITY-ST-ZIP: MIAMI, FL. 33176

21 TITLE: PD [] DELETE
 22 NAME: ESTRADA, AIDA
 23 STREET ADDRESS: 5459 N.W. 72ND AVE
 24 CITY-ST-ZIP: MIAMI, FL. 33122

31 TITLE: D [] DELETE
 32 NAME: MARIO TULIO GUTIERREZ
 33 STREET ADDRESS: 801 S. BAY SHORE DRIVE BOX 8
 34 CITY-ST-ZIP: MIAMI, FL. 33131

41 TITLE: D [] DELETE
 42 NAME: GUSTAVO V. LOPEZ
 43 STREET ADDRESS: 7921 SW 40TH ST. STE 50
 44 CITY-ST-ZIP: MIAMI, FL. 33155

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE: [] Change [] Addition
 12 NAME: 400002940634--1
 13 STREET ADDRESS: -07/23/99--01094--029
 14 CITY-ST-ZIP: *****900.00 *****900.00

21 TITLE: [] Change [] Addition
 22 NAME: 400002940634--1
 23 STREET ADDRESS: -07/23/99--01094--030
 24 CITY-ST-ZIP: *****8.75 *****8.75

31 TITLE: [] Change [] Addition
 32 NAME: [] Change [] Addition
 33 STREET ADDRESS: [] Change [] Addition
 34 CITY-ST-ZIP: [] Change [] Addition
 41 TITLE: [] Change [] Addition
 42 NAME: [] Change [] Addition
 43 STREET ADDRESS: [] Change [] Addition
 44 CITY-ST-ZIP: [] Change [] Addition
 51 TITLE: [] Change [] Addition
 52 NAME: [] Change [] Addition
 53 STREET ADDRESS: [] Change [] Addition
 54 CITY-ST-ZIP: [] Change [] Addition
 61 TITLE: [] Change [] Addition
 62 NAME: [] Change [] Addition
 63 STREET ADDRESS: [] Change [] Addition
 64 CITY-ST-ZIP: [] Change [] Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Aida Estrada* DATE: 6-8-99 305/885-0252