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 # 535281 1. Corporation Name

UNLIMITED CARGO SERVICE CO., INC.

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90111 022 ***150.00



Principal Place	e of Business	Mailing Address			(100101 DIIOO IIEEE AIIIO IIOOI IO	INI 1461 OLECI D	1611 01011 01011 0	
6832 NW 77 COURT		6832 NW 77 COURT						
MIAMI FL 33166		MIAM) FL 33166			DO NOT WRITE IN THIS SPACE			
				3 [Date Incorporated or Qualifed		01700	
				1	05/09/1977			
2. Principal Pl	ace of Business	2a. Mailing Address			El Number		Ар	plied For
	N.W. 74TH STREET	26 8355 N.W.	74TH STREET	r !	59-1755615		No	t Applicable
Suite, Apl.		Suite, Apt. #, etc.			Certificate of Status Desired		\$8.75 A	Additional
22		27		J. (Fee Re	quired
City & State		City & State		6. 8	Election Campaign Financing		\$5.00	, I
23	I, FL	MIAMI, FL			Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Country		This corporation owes the curre	ent year int	angible Ki Yes	□No
24 3316	6-2223 25 USA		USA USA		Personal Property Tax Name and Address of New R	egistered		
<u> </u>	Name and Address of Current	10.	Manie and Address of New N	<u>egisterea</u>				
GON	IZALEZ, FRANCISCO							
6832 N.W. 77TH CT.					O. Box Number is Not Accepta 74TH STREET	ible)		
MIAMI FL 33166			83	2_1Y_0_YY_0	74III SINDDI			
							7.2	×
			84 City	MIAMI		FL	85 Zip (331	66-2223
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508, Florida Statutes	s, the above-named	corporation	submits this statement for the	purpose of	changing its	registered
office or registered agent. I am familing and accept the obligations. Sections of Sections								
· · · · · · · · · · · · · · · · · · ·								
SIGNATURE	Signature, typed or printed name of registered agent	and the it is is able (NOTE F	Registered Agent signature r			OATE -		
12.	OFFICERS AND		13	A	DDITIONS/CHANGES TO OF	FICERS AN		
TITLE	PD	☐ DELETE	11 TITLE				Change	Addition
NAME	GONZALEZ, FRANCISCO		12 NAME			_		
STREET ADDRESS	6832 NW 77TH CT		13 STREET ADDRESS		N.W. 74TH STREET			
CITY-ST-ZIP	MIAMI FL	C Desert	1.4 CITY-ST-ZIP	MIAMI	, FL <u>33166-2223</u>	3	X Change	Addition
TITLE	STD	DELETE	21 TITLE	1			- M Change	
NAME	GARCIA, AURELIO		22 NAME	0355	M II 74TH CTREES	г		+
STREET ADDRESS	6832 NW 77TH CT MIAMI FL		2 3 STREET ADDRESS		N.W. 74TH STREET			
CITY-ST-ZIP	MIAMI FC	DELETE	2 4 CITY-S1-ZIP 3 1 TITLE	MIAMI	, FL 33166-2223)	Change	Addition
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NAME STREET ADDRESS			3 3 STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP			34 City-St-ZiP					
TITLE	-	☐ DELETE	4 1 TITLE	 		_	☐ Change	☐ Addition
NAME			4 2 NAME					
STREET ADDRESS			43 STREET ADDRESS	Ì				}
CITY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		☐ DELETE	51TITLE				☐ Change	Addition
NAME			52 NAME					
STREET ADDRESS			53 STREET ADDRESS					
CITY-ST-ZIP			54 CITY-ST-ZIP	<u> </u>				
TITLE		DELETE	61TITLE				Change	Addition
NAME			62 NAME					
STREET ADDRESS			63 STREET ADDRESS					
L CITY OT ZID			6.4 CITY - ST- ZIP	1				

14. I 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 counterfun or the receiver or trustee empty ered to elected this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if managed or on an attachment with a larger section.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-592-7630

Daytime Phone #