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• PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 584748 (8)

1. Corporation Name

TCX AIRFREIGHT, INC.



Principal Place of Business

3000 N.W. 74TH AVE.
MIAMI FL 33122

Mailing Address

3000 N.W. 74TH AVE.
MIAMI FL 33122

3. Date Incorporated or Qualified
10/01/1978

3a. Date of Last Report
02/09/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRIED RONALD L.
9360 SUNSET DR
BLDG. 200 SUITE 285
MIAMI FL 33184

81 Name

MICHAELS, MARVIN D.

82 Street Address (P.O. Box Number is Not Acceptable)

1010 S. W. 86 CT.

83

MIAMI, FLORIDA 33144

84 City

FL

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

MARVIN D. MICHAELS

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/23/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME ARIAS, JULIO
STREET ADDRESS 3000 NW 74TH AVE
CITY- ST- ZIP MIAMI FL
XX DELETE

TITLE VS
NAME MIRANDA, JAY B.
STREET ADDRESS 3000 NW 74TH AVE
CITY- ST- ZIP MIAMI FL
TITTLE CHANGE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP
Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

JAY B. MIRANDA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAY B. MIRANDA

2/23/96
Date

Daytime Phone #

CR2E034 (12/95)