FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **F93000003201 (1)**

1. Corporation Name

~~SATIN AIR FREIGHT, INCORPORATED~~
GSI SATIN CARGO SYSTEMS INC

Principal Place of Business	Mailing Address
585 STEWART AVE. GARDEN CITY NY 11530	585 STEWART AVE. GARDEN CITY NY 11530

3. Date Incorporated or Qualified: 07/09/1993
3a. Date of Last Report: 06/12/1995

2. Principal Place of Business
21: 152-01 ROCKAWAY BLVD
22 Suite, Apt. #, etc:
23 City & State: JAMAICA NY
24 Zip: 11434
25 Country: USA

2a. Mailing Address
26: 152-01 ROCKAWAY BLVD
27 Suite, Apt. #, etc:
28 City & State: JAMAICA NY
29 Zip: 11434
30 Country: USA

4. FEI Number: 11-2204000 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BUSTAMANTE, CARLOS R
2802 NW 112 AVE.
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 _____ DATE _____
Signature, typed or printed name of registered agent, and title if applicable — Required when changing registered agent

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	WALLACH, JOCHANAN		12 NAME		
STREET ADDRESS	7 - 9 PALYAM AVE.		13 STREET ADDRESS		
CITY-ST-ZIP	HAIFA, ISRAEL 31016		14 CITY, ST, ZIP		
TITLE	DVC	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	PILI, AMI		22 NAME	700001833057 -05/21/96--01152--005 ***200.00	
STREET ADDRESS	18 HAMASGER ST.		23 STREET ADDRESS		
CITY-ST-ZIP	TEZ AVIV, ISRAEL 67774		24 CITY, ST, ZIP		
TITLE	D	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	RAMON, SHAUL		32 NAME		
STREET ADDRESS	90 HAHASHMONAIM ST.		33 STREET ADDRESS		
CITY-ST-ZIP	TEL AVIV, ISRAEL 67011		34 CITY, ST, ZIP		
TITLE	PD	☐ DELETE	41 TITLE	PD	☑ Change ☐ Addition
NAME	POLEG, YACOV		42 NAME	DAUBE, JACOB	
STREET ADDRESS	585 STEWART AVE.		43 STREET ADDRESS	152-01 ROCKAWAY BLVD	
CITY-ST-ZIP	GARDEN CITY NY 11530		44 CITY, ST, ZIP	JAMAICA, NY 11434	
TITLE	T	☐ DELETE	51 TITLE		☑ Change ☐ Addition
NAME	JOHNSON, PETER A		52 NAME		
STREET ADDRESS	585 STEWART AVE.		53 STREET ADDRESS	152-01 ROCKAWAY BLVD	
CITY-ST-ZIP	GARDEN CITY NY 11530		54 CITY, ST, ZIP	JAMAICA, NY 11434	
TITLE		☐ DELETE	61 TITLE	C	☐ Change ☑ Addition
NAME			62 NAME	STEINBUCH, ELI	
STREET ADDRESS			63 STREET ADDRESS	18 HAMASGER ST	
CITY-ST-ZIP			64 CITY, ST, ZIP	TEL AVIV, ISRAEL 67774	

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)(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 appears in Block 12 or Block 13 if changed, added or on an attachment with an address.

SIGNATURE: PETER JOHNSON (T) 4/23/96 (718) 712-2477
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)