FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 AM 6:27

DOCUMENT # **F93000004801 (7)**

1. Corporation Name
ELCO FREIGHT INTERNATIONAL INC.

Principal Place of Business	Mailing Address
5701 N.W. 74TH AVENUE SUITE A MIAMI FL 33166	5701 N.W. 74TH AVENUE SUITE A MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/14/1993
3a. Date of Last Report: 02/01/1994

2. Principal Place of Business 21 7801 N.W. 37th St.	2a. Mailing Address 26 7801 N.W. 37th St.
Suite, Apt. #, etc 22 Suite 202	Suite, Apt. #, etc 27 Suite 202
City & State 23 Miami FL 33166	City & State 28 Miami, FL 33166
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number: 11-2245261 ☐ 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

CT CORP. SYSTEMS
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 (NOTE: Registered Agent signature required when changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC	11 TITLE	☐ Change ☐ Addition
NAME	PUJOL, JOHN J	12 NAME	
STREET ADDRESS	6033 W. CENTURY BLVD. SUITE 720	13 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90045	14 CITY-ST-ZIP	
TITLE	WC	21 TITLE	☐ Change ☐ Addition
NAME	PUJOL, ANDREW P	22 NAME	
STREET ADDRESS	RT 1 & 9 SOUTH, THE HEMISPHERE CTR 5TH FL	23 STREET ADDRESS	
CITY-ST-ZIP	NEWARK NJ 07114	24 CITY-ST-ZIP	
TITLE	DS	31 TITLE	☐ Change ☐ Addition
NAME	STONKUS, ALEXANDER C	32 NAME	
STREET ADDRESS	RT 1 & 9 SOUTH, THE HEMISPHERE CTR 5TH FL	33 STREET ADDRESS	
CITY-ST-ZIP	NEWARK NJ 07114	34 CITY-ST-ZIP	
TITLE	TD	41 TITLE	☐ Change ☐ Addition
NAME	DONOHUE, NANCY	42 NAME	
STREET ADDRESS	420 W. MERRICK ROAD	43 STREET ADDRESS	
CITY-ST-ZIP	VALLEY STREAM NY 11580	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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 above, or on an attachment with an address.

SIGNATURE: Alexander C. Stonkus 3/27/95 201 623-2500
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #

0180440 CP