FILED

2001 UNIFORM BUSINESS REPORT (UBR)

May 14, 2001 8:00 am DOCUMENT # F9400000299 Secretary of State TRANSCARIBE FREIGHT CORP. 05-14-2001 90226 008 ***150.00 Principal Place of Business Mailing Address 7007 NW 30TH STREET 7007 NW 30TH STREET MIAMI FL 33122 MIAMI FL 33122 UUUUUUUU 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 66-0380311 Not Applicable Zip Country 2ip Country \$8.75 Additional 5. Certificate of Status Desired Fee Bequired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name AREVALO, FRANK Street Address (P.O. Box Number is Not Acceptable) 7007 NW 30TH STREET **MIAMI FL 33122** City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ■ Addition TITLE □ Delete TITLE SARDINA, OSCAR NAME NAME 7007 NW 30TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33122** ☐ Change ☐ Addition TITLE ☐ Delete TITLE AREVALO, FRANK NAME NAME 7007 NW 30TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI FL 33122 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition SARDINA, MARGOT NAME NAME 7007 NW 30TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33122 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition ECHEVARRIA, ANGEL NAME NAME 7007 NW 30TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33122 CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition **NEGRON, RAYMOND A** NAME NAME 7007 NW 30TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33122 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attackment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #