


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # F94000000299 1. Entity Name TRANSCARIBE FREIGHT CORP.	
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Principal Place of Business 7007 NW 30TH STREET MIAMI, FL 33122	Mailing Address 7007 NW 30TH STREET MIAMI, FL 33122
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DO NOT WRITE IN THIS SPACE



04112005 No Chg-P CR2E034 (10/03)

4. FEI Number 66-0380311	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AREVALO, FRANK
7007 NW 30TH STREET
MIAMI, FL 33122

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SARDINA, OSCAR 7007 NW 30TH STREET MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS AREVALO, FRANK 7007 NW 30TH STREET MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SARDINA, MARGOT 7007 NW 30TH STREET MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ECHEVARRIA, ANGEL 7007 NW 30TH STREET MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NEGRON, RAYMOND A 7007 NW 30TH STREET MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/30/05-80132-016 150.00

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

Frank Arevalo

AREVALO, FRANK

4/27/05

305 593-0190

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #