

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000000243 (4)

1. Corporation Name

WRAG-TIME AIR FREIGHT, INC.



Principal Place of Business

WRAG-TIME TRANSPORTATION, INC.
7379 NORTH WEST 31ST STREET
MIAMI FL 33122

Mailing Address

WRAG-TIME TRANSPORTATION, INC.
7379 NORTH WEST 31ST STREET
MIAMI FL 33122

3. Date Incorporated or Qualified
01/17/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Wrag-time Transportation Inc.

27 Suite, Apt. #, etc.

304 Newton Ave

28 City & State

Oaklyn

N.J.

29 Zip

08107

30 Country

USA

4. FEI Number

11-2556546

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

REESE, WILLIAM G III
7379 NORTH WEST 31ST ST.
MIAMI FL 33122

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 607.1506, 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

Signature typed or printed name of registered agent

(Print) Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE

PC

☐ DELETE

NAME

EMRICK, LEONARD C

STREET ADDRESS

625 NORTH GOVERNOR PRINTZ BLVD

CITY - ST - ZIP

ESSINGTON PA 19029

TITLE

V

☒ DELETE

NAME

ABBOTT, H. BRUCE

STREET ADDRESS

2059 BELGRAVE AVENUE

CITY - ST - ZIP

HUNTINGTON PARK CA 90255

TITLE

S

☐ DELETE

NAME

WEILEY, WILLIAM C

STREET ADDRESS

625 NORTH GOVERNOR PRINTZ BLVD.

CITY - ST - ZIP

ESSINGTON PA 19029

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☒ Change ☐ Addition

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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 of this filing, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)