SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of Stat€
DIVISION OF CORPORATIONS

DOCUMENT # G38860

(4)

ALL-POINTS FORWARDING, INC.

Principal Place of Business

Mailing Address

8803 NW 23ST MIAMI FL 33172

2. Principal Place of Business

21

8803 NW 23ST MIAMI FL 33172

2a. Mailing Address

26

APPROVED AND FILED

1297 JUL 31 AN II: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3a. Date of Last Report

Applied For

Not Applicable

03/22/1996

3. Date Incorporated or Qualified

05/17/1983

59-2299324

4. FEI Number

Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional se Regulred	
City & Stat	State City & State					6. Election Campaign Financing		.00 May Be	
Zip 24	Country Zip 25 29 30		Country		Trust Fund Contribution				
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
RU	BIO, RICARDO			B1	Name		. ==		
11970 SW 92 LANE MIAMI FL 33186					82 Street Address (P.O. Box Number is Not Acceptable)				
				84	City		las I	Zia Onda	
				104	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									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	PD	RS			3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN				
TITLE	RUBIO, RICARDO E.	L	] DELETE	1.1 TITLE			∐ Cha	nge L Addition	
NAME	11970 SW 92 LANE			1.2 NAME					
STREET ADORESS	MANUEL				ADDRESS				
CITY-ST-ZIP TITLE	PD		DELETE	1.4 CITY-S	T-ZIP				
NAME	RUBIO, TAMARA	L		2.1 TITLE	Ì		☐ Cha	1	
STREET ADDRESS	11970 SW 92 LANE			22 NAME	1000000	annnöös	25767	98	
CITY-ST-ZIP	MIAMI FL			2.3 STREET		90002 -08/05 ****8	79701024	1U13	
TITLE	***************************************		DELETÉ	2. 4 CITY - S 3.1 TITLE	1 - ZIP	THE STATE OF THE S	<u> C5。UU 東海中</u> □ Cha	mge Addition	
NAME		-		3.2 NAME			LJ 0110	ingo 🗀 Addition	
STREET ADDRESS				3.3 STREET	ADDRESS			i	
CITY-ST-ZIP				3.4. CITY - S					
TITLE			DELETE	4.1 TITLE	11-21		☐ Cha	noe Addition	
NAME		_	_	4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP	  -			4.4 CITY-S				[	
TITLE			DELETE	5.1 TITLE			Cha	nge Addition	
NAME				5.2 NAME					
STREET ADDRESS				5 3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CITY-S1	- <b>7</b> IP			.	
TITLE			DELETE	6.1 TITLE			☐ Cha	nge Addition	
NAME				6.2 NAME				144,Va 1	
STREET ADDRESS				6.3 STREET	ADDRESS		•	1 ' 1461K	
CITY-ST-ZIP				6.4 CITY - ST	- ZIP			. 4.	
14. I do herek	by certify that the information s	upplied with this filing d	oes not qualify f	or the exer	nption stated	in Section 119.07(3)(i), Florida Statuti	es. I further certify	that the	
14. I do 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 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 truttee empowered to execute this sport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an ettachment with an address.									