

**CORPORATION
ANNUAL REPORT
1995**



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

FILED

95 MAY -1 AM 3:47

DOCUMENT # G39111 (1)
1. Corporation Name
AERO EXPRESS FREIGHT FORWARDING CORP.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
6952 NW 51ST ST. 6952 NW 51ST ST.
MIAMI FL 33166-5626 MIAMI FL 33166-5626

3. Date incorporated or Qualified **04/26/1983** 3a. Date of Last Report **04/18/1994**
4. FCI Number **59-2301928** 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. 198.032 Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 State Apt # of 26 State Apt # of
22 City & State 27 City & State
23 City & State 28 City & State
24 City & State 25 City & State 29 City & State 30 City & State

9. Name and Address of Current Registered Agent

**SALVAT, JUAN F.
6952 NW 51 STREET
MIAMI FL 33166**

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 607.050 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 607.0506, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SALVAT, JUAN F.
STREET ADDRESS	12646 SW 95TH COURT
CITY, ST, ZIP	MIAMI FL
TITLE	VP
NAME	BENITEZ, SUSANA
STREET ADDRESS	6952 NW 51ST ST
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN '95

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I, the undersigned, 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 if changed, or on an attachment with an address.

SIGNATURE:

Susana M. Benitez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
SUSANA BENITEZ

43295 305791-3732