FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90027 015 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

<ol> <li>Corporation</li> </ol>	MENT # <b>G63064</b> E CARGO SERVICES, INC.	-					
Principal Place	of Business	Mailing Address			* 1241111	eren eren 81611 \$11	
2461 NW 67TH AVE BLDG 700 - MIA MIAMI FL 33122 US		P.O. BOX 660453 MIAMI SPRINGS FL 33266-0453 US			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		}
	·				10/01/1983		
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number 59-2337284	<u> </u>	Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$8.75</b> Ad Fee Red	1
City & State	8	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	•
Zip	Country	Zip	Country		8. This corporation owes the current year !	ntangible	
24	25	29 30	]		Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registere	d Agent	
				Name			
	nstein, jeffrey a esq. N. Biscayne BLVD.		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
SUITE 1707			83	1			
MIAMI FL 33132							\
			84	City	· F	L 85 Zip C	ode
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autrations of, Section 607.0505, Florid	onzed by a Statute:	the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as reg	istered
40	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re	13.	int signature require	ad when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	RS IN 12
12.	P OFFICERS AI	DELETE	1.1 TITLE		ADDITIONS/OFFAITOES TO SET TOLERO	☐ Change	Addition
NAME	RUEDA, EDUARDO	= 1.2 N					1
STREET ADDRESS	2461 NW 67 AVE			T ADDRESS			
CITY-ST-ZIP			1.4 CITY-	· I			
TITLE	VP					Change	Addition
NAME	JARMAN, ROGER	, 2.2 N					<b>\</b>
STREET ADDRESS	2461 NW 67TH AVE		2.3 STREE	T ADDRESS			
*CITY+ST+ZIP -	MIAMI FL	AMI-FLE 240		ST-ZiP	<u> </u>	.,	
TITLE	TS DELETE 3.1 T		3.1 TITLE		,	Change	Addition
NAME	GALINDO, HERNAN		3.2 NAME	,			
STREET ADDRESS	2461 NW 67TH AVE		3.3 STREE	TADDRESS			
CITY-ST-ZIP	MIAMI FL			ST-ZIP			<u> </u>
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME		^s		
STREET ADDRESS				T ADDRESS			Į
CITY-ST-ZIP		□ BelETE	4.4 CITY-	ST-ZIP		☐ Change	Addition
TITLE	·	☐ DELETE	5.1 TITLE 5.2 NAME		•	□ cuan∂a	- Addition
NAME				T ADDRESS	•		
STREET ADDRESS			5.4 CITY-1				}
CITY-ST-ZIP		□ DELETE	6.1 TITLE	27-EIF		☐ Change	Addition
TITLE			6.2 NAME				

14. 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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP