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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K24125** (2)

1. Corporation Name

ACMETRANS WORLDWIDE CARGO SERVICES, INC.

Principal Place of Business

**9270 NW 100 STR
MEDLEY FL 33178
US**

Mailing Address

**9270 NW 100 STR
MEDLEY FL 33178
US**



3. Date Incorporated or Qualified

05/02/1988

3a. Date of Last Report

05/23/1995

4. FEI Number

65-0049293

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SWOBODA, RUDOLF G.
3035 5TH AVENUE NORTH
ST. PETERSBURG FL 33713**

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 607.1508, 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 (must be legible and in blue ink)

(NOTE: Registered Agent Signature required for this statement)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **P**
BEDOYA, FABIO C.
STREET ADDRESS **TORRE FONDO COMUN, #15**
CITY-ST-ZIP **CARACAS, VENEZUELA**

TITLE ☐ DELETE

NAME **V**
PONCE, FABIO A. BEDOYA
STREET ADDRESS **TORRE FONDO COMUN, #15**
CITY-ST-ZIP **CARACAS, VENEZUELA**

TITLE ☐ DELETE

NAME **D**
BEDOYA, LOURDES
STREET ADDRESS **TORRE FONDO COMUN, #15**
CITY-ST-ZIP **CARACAS, VENEZUELA**

TITLE ☐ DELETE

NAME **S**
RODRIGUEZ, ROBERT A
STREET ADDRESS **8050 NW 8TH STREET #206**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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 if changes, or on an attachment with an address.

SIGNATURE: **RODRIGUEZ, ROBERT A**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/13/96

(305) 882-9009

CR2E034 (12/95)