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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K60590

1. Corporation		MPORT INC					
TRANS-CARIBBEAN AIR EXPORT & IMPORT INC.					A PORTUGE SIGNALIS CONTRACTOR CONTRACTOR	II BIBII BIBII BIBII C	ARBIN MINNE IN DE
Principal Place of Business Mailing Address					T JOORANILI OND DIVILE ODLAT DEKIN LOURI ONDIL OLOUK OLOUK ÖTÄRT ÖTÄRE ÖTÄR ÖTÄRE ÖTÄR ÖTÄRE ÖTÄR ÖTÄR ÖTÄRE ÖTÄRE ÖTÄR ÖTÄR ÖTÄR ÖTÄR ÖTÄR ÖTÄR ÖTÄR ÖTÄR		
8730 SW 57 PL POB 84-1221				•			
I .		HOLLYWOOD FL 33084-3221	LLYWOOD FL 33084-3221		BO NOT IMPLE IN THE OPINE		
US US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
	2				01/20/1989		
2. Principal Place of Business 2a. Mailing Address				•	4, FEI Number	I Ap	plied For
21 26		<u> </u>			65-0113782	<u> </u>	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	Additional
22		27			5. Certificate of Status Desired	Fee Re	quired
City & State		City & State		6. Election Campaign Financing	\$5.00	•	
23		28		Trust Fund Contribution Added to Fees			
Zìp	Country Zip		Country		8. This corporation owes the current year	_=	X No
24 29 29 :			<u> [0]</u>	<u>· </u>	Personal Property Tax. 10. Name and Address of New Registere		1 1 1 1 1 1 1 1 1 1
	3. Hamo and Address of Current	registered Agent	81	Name	10. Name and Address of New Registers	u rigent	
LINC	COLN, CHARLES	Company of the Company		04	(D.O. Day March of Mark Assessments)		
LINCOLN, CHARLES 8730 SW 57TH PL			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		era en la reta
, COC	OPER CITY FL 33328		83			Trouble to	1 1 1 1 1 1 1 1
			84	City	- A. Corry Call 19 Gar 新聞 個 ・ Correspond	■ 85 Zip C	1.31, (6-1)
,				•	F	LI	
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.							
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE			<u> </u>				<u> </u>
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: OFFICERS AND DIRECTORS			signature required	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DC IN 12
TITLE	D DELETE		13. 1.1 TITLE		the describe	Change	Addition
NAME	LINCOLN, CHARLES		1.2 NAME			– •	_
STREET ADDRESS	4744 AND FETTI BLIDE		1.3 STREET ADDRESS		•		
CITY-ST-ZIP	COOPER CITY FL		1.4 CITY-ST-ZIP				
TITLE	☐ DELETE 2.1 T		2.1 TITLE			☐ Change	☐ Addition
NAME	2.2		2.2 NAME				
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST	-ZiP			· · · · · · · · · · · · · · · · · · ·
TITLE	© SUC N & AN		3.1 TITLE		•	☐ Change	Addition
NAME			3.2 NAME		•		
STREET ADDRESS			3.3 STREET ADDRESS 3.4, CITY-ST-ZIP			***	, R
CITY-ST-ZIP TITLE				-ZIP		Change	
NAME			4.1 TITLE 4. 2 NAME	İ	and the second of the second o	" Surings /	.,
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST			•	
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				}
STREET ADÓRESS	**	5.3		ADDRESS			
CITY-ST-ZIP		·	5.4 CITY-ST	ZIP	<u> </u>		
TITLE	Same Danier State of		6.1 TITLE			☐ Change	☐ Addition
NAME	CONTRACTOR (STATE)		6.2 NAME		·	•	1
STREET ADDRESS	p - 2 - 2 - 10 - 10 - 12 - 12 - 12 - 12 -		6.3 STREET	AUDRESS I	•		,

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.

6.4 CITY-ST-ZIP