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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

1. Corporation Name (8)														
TRANSLINE FREIGHT FORWARDERS, INC.									:					
Principal Place of Business Mailing Address									-					
,														
10825 N.W. 33RD STREET 10825 N.W. 33RD STREET MIAMI FL 33172 MIAMI FL 33172										ĺ				
Min. 12 00112									DO NOT WRITE IN THIS SPACE					
									3. Date Incorporated	or Qualified				
2. Principal Place of Business 2a. Mailing Address									04/19/1989 4- FEI Number			1 100	alled For	
21				26 Walling Address				65-0160294	ł			oplied For		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				1	1	×	\$8.75					
22				27				5. Certificate of State	is Desired	<u> </u>	Fee Re	equired		
City & State				City & State					6. Election Campaigh Financing \$5.00 May Be					
23				Zip Country					Trust Fund Contril			Added t		
Zip	ip Country			Zip Cou 29 30			y			corporation olves or has paid the current year Intangible onal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent							-		10. Name and Address of New Registered Agent					
WENNIN, RUDOLF							Name			!				
10825 N.W. 33RD STREET						82 Street Addre			ss (P.O. Box Number is	Not Accepta	able)			
MIAMI FL 33172							1			1	,			
•						83								
						84 City				 	FL	85 Zip (Code	
11. Pursuant	to the provisi	ons of Sections 607.050	2 and 6	07.1508, Florida Statu	tes, the a	abov	e-named	corpo	ration submits this state	ment for the		changing it	s registered	
office or r agent. I a	egistered age im familiar wit	ons of Sections 607.050 ent, or both, in the State h, and accept the oblig	of Floridations of	da. Such change was f, Section 607.0505, Fl	authorize orida Sta	ed by atute:	y the corp s.	oratio	on's board of directors.	hereby acc	ept the app	ointment as	registered	
SIGNATURE											DATE			
Signature, typed or printed name of registered agent and title it applicable. (NOTI 12. OFFICERS AND DIRECTORS						Registered Agent signature require 13.			ADDITIONS/CHAN	SÉS TO OFF		DIRECTOR	IS IN 12	
TITLE	D			DELETE								Change	Addition	
NAME	WENNIN, RUDOLF			1.		1.2 NAME								
STREET ADDRESS	T ADDRESS 10825 N.W. 33RD STREET			1			1.3 STREET ADDRESS			 				
CITY-ST-ZIP							ST-ZIP			-		ET av	()	
TITLE	D			☐ DELETE			2.1 TITLE					L Change	Addition	
NAME	WENNIN, HELMUTH						2.2 NAME 2.3 STREET ADDRESS							
STREET ADDRESS	1011 M M AA 100						2.4 CITY-ST-ZIP			l I				
CITY-ST-ZIP TITLE	IVIIAMI FL 33172					3.1 TITLE						Change	Addition	
NAME					•	NAME				i L			f	
STREET ADDRESS					3.3 9	STREET	ADDRESS							
CITY-ST-ZIP					3.4.	CITY-S	ST-ZIP							
TITLE				DELETE		TLE						Change	Addition	
NAME					4.2	NAME				İ				
STREET ADDRESS							ADDRESS							
CITY-ST-ZIP				DELETE		CITY-S TITLE	ST-ZIP					Change	Addition	
TITLE						IAME							_ /Maidott	
NAME STREET ADDRESS							ADDRESS			1				
CITY-ST-ZIP						SITY-S	- 1			!				
TITLE				DELETE	6.1 T							Change	Addition	
NAME					6.2 N	IAME							į	
STREET ADDRESS					6.3 9	TREET	ADDRESS							
CITY-ST-ZIP					6.4 0	ary-s	T-ZIP			ì				

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 upplemental 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 for the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on large attachment with an address. I hereby certify that the information indicated on this annual report or strong officer or director of the corporation Block 12 or Block 13 if changed, or

SIGNATURE:

FILED

Feb 02 1998 8:00am

Secretary of State