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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

L47827

	MENT # L47827 & TRACK LOGISTICS, INC.	7 (5)						I++ G [\$4] 100t
Principal Place of Business Mailing Address							C(E) C(E) T	AL DEBIH 1881
2920 SOUTHWEST 115TH AVENUE POST OFFICE BOX 651340 MIAMI FL 33165 MIAMI FL 33265								
US US						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
Principal Place of Business						01/30/1990 4. FEI Number		
	ace of Business	26				65-0174609	<u> </u>	oplied For ot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.						Additional
22		27				5. Certificate of Status Desired		equired
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cour	ıtry		8. This corporation owes or has paid the cu		tangible
24	9. Name and Address of Current	29 Registered Agent	30			Personal Property Tax due June 30. 10. Name and Address of New Registered		
ALI	STIN, RICHARD B.	rtegisteres Agent		81 N	lame	10.		
	90 N.W. 53RD STREET		_			(O.O. D. M		
SUITE 300				82 S	treet Addre	ss (P.O. Box Number is Not Acceptable)		
MIAMI FL 33166				83				
			-	84 C	lity		85 Zip	Code
					•	FL.	_ ' '	
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 a	m familiar with, and accept the obliga	tions of, Section 607.0505, I	Florida Statu	ites.	e corporatio	or a board or an exterior. Thereby accept the ap-	50	109.0.0.00
SIGNATURE						d when reinstating) DATE		
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE OFFICERS AND DIRECTORS			Registered Agent signature require 13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12
TITLE	PD DELETE			1.5 TITLE		, and the state of	Change	Addition
NAME	DEAL, WILLIAM H.		1.2 NA	1.2 NAME				
STREET ADDRESS	2920 SOUTHWEST 115TH AVENUE		1.3 \$TF	1.3 STREET ADDRESS				
CITY - ST - ZIP	Miami Fl		1.4 CIT	1.4 CITY-ST-ZIP				
TITLE	ST DELETE			2.1 TITLE			Change	Addition
NAME				ME				1
STREET ADDRESS	2920 SOUTHWEST 115TH AVENUE			2.3 STREET ADDRESS		چ- د		Į
CITY - ST - ZIP	MIAMI FL VP DELETE			2. 4 CITY - ST - ZIP 3.1 TITLE			Change	☐ Addition
TITLE	DEAL. KATHLEEN A			3.2 NAME			C Octavide	ROOMON
name Street address	2920 SW 115 AVE			VIL REET ADD	DESC.]
CITY-SI-ZIP	MIAMI FL			Y-ST-Z				
TITLE		DELETE	4,1 TITI				Change	☐ Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STF	REET ADO	RESS			
CITY-ST-ZIP				Y-ST-ZI	P		——————————————————————————————————————	
TITLE		☐ DELETE	: 5.1 TITI				Change	Addition
NAME			5.2 NAI					
STREET ADDRESS				REET ADD				
CITY-ST-ZIP		DELETE		Y-ST-ZI	Р		Change	Addition
TITLE NAME		- Deceir	6.1 YITI 6.2 NAI					
1 of 2077in			- VIII-1711	-				,

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

305-551-0370

FILED

Jan 15 1998 8:00am

Secretary of State