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**

DOCUMENT # L95899

DELTA CARGO CORPORATION

Principal Plac	ce of Business	Mailing Address			e indiinii din ibidi dilat ibiin idiib ibii dia	il digit dil iji di k	II BIBIT BIBIT \$887
2047 NW 79TH AVE		2047 NW 79TH AVE					
MIAMI FL 33122		MIAMI FL 33122			·		
U\$ U\$					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 08/27/1990	·	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21 26		26			65-0211415	• 1	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional		
22		27			3. Certificate of Status Desired	Fee I	Required
City & State City & State					6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zip		intry	8. This corporation owes the current year		
24	25		30	T	Personal Property Tax.	☐ Yes	⊠No
	9. Name and Address of Cur	rent Registered Agent		94 Name	10. Name and Address of New Registere	d Agent	
חבו	LOCA, MARTIN			81 Name			
	7 NW 79TH AVE			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
	· · · · · · · · · · · · · · · · · · ·					<u> </u>	. a
MIA	MI FL 33122			83			
` .				84 City		85 Zip	Code
14 Digginant	to the provisions of Sections 507 /	0502 and 607 1508 Elorida Statuto	tho a	hove named same	poration submits this statement for the purpose	of changing :	to societorod
office or i	rggistered agent, or both, in the Sta	ate of Florida. Such change was autiligations of, Section 607.0505, Floridations	thorized	by the corporation	on's board of directors. I hereby accept the app	pointment as	registered
SIGNATURE							
	Signature, typed or printed name of registered	<u> </u>		Agent signature require	·		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	P P P P P P P P P P P P P P P P P P P	CI OFFEIF	1.1 TIT		MARKET BOOK	☐ Change	Addition
NAME	BROWN, KENNETH		1.2 NA			, -	
STREET ADDRESS			ŀ	REET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33122	□ DELETE	1	TY-ST-ZIP			
TITLE	D	☐ DELETE	2.1 111			Change	Addition
NAME	DILLON, ENRIQUE		2.2 NA	ME	•		İ
STREET ADDRESS			2.3 ST	REET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33122		******	TY-ST-ZIP			<u>. </u>
TITLE	VPTS	☐ DELETE	3.1 TII	ue –		Change	Addition
NAME	DELL'OCA, MARTIN		3.2 NA	ME	•	•	
STREET ADDRESS			3.3 ST	REET ADDRESS			· jraje
CITY-ST-ZIP	MIAMI FL 33122		3.4. CF	TY-ST-ZIP .		1.77	
TITLE		☐ DELETE	4.1 TIT	LE .		☐ Change	Addition
NAME.			4. 2 N	AME			
STREET ADDRESS			4.3 ST	REET ADDRESS	-		
CITY-ST-ZIP			4.4 CT	ry-st-zip		•	
TITLE		☐ DELETE	5.1 TIT			Change	☐ Addition
NAME			5.2 NA	ME		5	1
STREET ADDRESS	'		5.3 ST	REET ADDRESS			
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	6.1 TIT		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	4 1		6.2 NA	ME		,	
STREET ADDRESS				REET ADDRESS	·		-
PILEE I ADDICE 22					•		
CITY OF TID	!		3 6 4 0 17	Y-ST-ZIP			

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 or an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

Feb 02, 1999 8:00am

Secretary of State

02-02-1999 90014 030 ***150.00