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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M44678

(4)

CANOR AIR FREIGHT FORWARDERS, INC.

(7

FILED
Apr 28 1997 8:00am
Secretary of State

Principal Place of Business 7060 NW 60 ST MIAMI FL 33166		Mailing Address	Mailing Address			F IDELEGIT I'M DIOUS DIDIO DIJII (ADDIU 3011 DIELI DIDII				
		7080 NW 50 ST Miami Fl 33166-5634								
					3. Date Incorporated 01/12/1987	or Qualified		e of Last R	eporl	
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number 59-2763149			<u> </u>	oplied For of Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Statu	ie Desired		\$8.75	Additional	
22		27							equired	
City & State		City & State			6. Election Campaign Trust Fund Contrit	_			May Be to Fees	
Zip	Country	7(p	Co	untry	8. This corporation h	as liability for in	yungible t	ax under s		
24	25	29	30	<del></del>	Florida Statutes  10. Name and Addre		Yes [	-		
	9. Name and Address of Curren	it Hegistered Agent	·	81 Name	10. Name and Addre	ss of New Neg	JISTETEU A	Beur		
1193	MAXXXRA KAW 43071kBL KRXXXXX			<ul><li>82 Street A</li><li>83</li><li>84 City</li></ul>	NANCY CAMACH ddress (P.O. Box Number is 7080 N.W. 50 Miami, Fl 33 Miami	Not Acceptab ST	FL		Code 166	
SIGNATURE _	o the provisions of Sactions 607 07, or state agent, or both, in the Skilly in familial with, and accept the state agent when the state agent to t	uwaeno			corporation submits this state oration's board of directors.	ement for the p I hereby accep	urpose of the appo	changing i bintment as	ts registered registered	
12.	OFFICERS AN		13.		ADDITIONS/CHAN	GES TO OFFIC				
TITLE	D	DELETE	1.1	liret				Change	Addition	
NAME	CAMACHO, NANCY			NAME						
STREET ADDRESS	14375 SW 45TH TERRACE MIAMI FL			STREET ADDRESS						
CITY-ST-ZIP TITLE	D D	X DELETE		CITY-ST-ZIP				Change	Addition	
NAME	DERBIRAK MOPIAX	EL PECCIO		NAME				·		
STREET ADDRESS	1/1936 x830 x/1997 txt RL		2.3	STREET ADDRESS						
CITY-ST-ZIP	MANXXXX		2. 4	CITY - ST - ZIP						
TITLE		☐ DELETE	31	litt F				L Change	Addition	
NAME				NAME						
STREET ADDRESS				STREET ADDRESS						
CITY-ST-ZIP		DELETE		CHTY-ST-ZIP TITLE				Change	Addition	
TITLE NAME				NAME						
STREET ADDRESS			- 1	STREET ADDRESS						
CITY-ST-ZIP				CITY-S1-ZIP						
TITLE		DELETE	51	IIILE				Change	☐ Addition	
NAME			52	NAME						
STREET ADDRESS			53	STREET ADDRESS						
CITY-ST-ZIP			54	CHY-SI-ZIP						
TITLE		☐ DELETE	51	TITLE		-		Change	Addition	
NAME			62	NAME						
STREET ADDRESS			63	STREET ADDRESS						
CITY-ST-ZIP			64	CITY-ST-ZIP						

14. I do 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 reflort 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 find acciver or trust demonstrate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 18 or Block 13 if changed or given attachment with an address.

4/30/97

305-4771020

NANGY CAMACHO