

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2001 8:00 am
Secretary of State

01-13-2001 90044 005 ***150.00

DOCUMENT # P00000020116

1. Entity Name

ALL WORLD CARGO, INC. ✓

Principal Place of Business

7500 N.W. 25TH ST
#208
MIAMI FL 33122

Mailing Address

7500 N.W. 25TH ST
#208
MIAMI FL 33122



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7500 NW 25th street.

3. Mailing Address

Suite, Apt. #, etc.
208

Suite, Apt. #, etc.

City & State

Miami Florida

City & State

City & State

4. FEI Number

65-0984608

Applied For

Not Applicable

Zip

33122

Country

USA

Zip

33122

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JARAMILLO, MARIA C
7500 N.W. 25TH ST
#208
MIAMI FL 33122

7. Name and Address of New Registered Agent

Name FABIO JARAMILLO

Street Address (P.O. Box Number is Not Acceptable)

7500 NW 25th street +208

City

Miami FL

FL

Zip Code

33122

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Fabio Jaramillo FABIO JARAMILLO

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when restating)

01-12-01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

D
OSPINA, CARLOS
15630 SW 49TH ST
MIAMI FL 33185

TITLE NAME ☐ Delete

D
JARAMILLO, MARIA C
9440 W. FLAGLER ST #310
MIAMI FL 33174

TITLE NAME ☐ Delete

D
12317 SW 95TH TERRACE
MIAMI FL 33186

TITLE NAME ☐ Delete

D
JARAMILLO, FABIO
9440 W. FLAGLER ST #310
MIAMI FL 33174

TITLE NAME ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
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CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carlos Ospina CARLOS OSPINA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01.09.01

(305) 591 8170

Date

Daytime Phone #

CR2E034 (10/00)