

FILED
May 06, 2003 8:00 am
Secretary of State

05-06-2003 90052 012 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000085985

1. Entity Name
SPACE CARGO MIAMI, CORPORATION



Principal Place of Business
**963 NW 68 ST
MIAMI, FL 33166**

Mailing Address
**1111 BRICKELL BAY DR.
#1603
MIAMI, FL 33131**

2. Principal Place of Business

7660 JW 83 ct.

Suite, Apt. #, etc.

3. Mailing Address

7660 JW 83 ct.

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Miami - FL

City & State
Miami - FL 3

4. FEI Number
65-1133887

Applied For
☐ Not Applicable

Zip
33143

Country
USA

Zip
33143

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**THODE, JUAN C
1111 BRICKELL BAY DR.
#1603
MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name
CLAUDIA Czetyko

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

7660 JW 83 ct.

City
Miami

FL

Zip Code
33143

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

4-24-03

**FILE NOW WITH FEE IS \$150.00
After May 1, 2005 Fee will be \$660.00
Make check payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☐ Delete
NAME	MONTERO, ANDRES	
STREET ADDRESS	153 SW 22ND ROAD	
CITY-ST-ZIP	MIAMI, FL 33129	
TITLE	VD	☐ Delete
NAME	ARANGO, JUAN MOISES	
STREET ADDRESS	153 SW 22ND ROAD	
CITY-ST-ZIP	MIAMI, FL 33129	
TITLE	TD	☐ Delete
NAME	MARTIN, VALENTIN	
STREET ADDRESS	153 SW 22ND ROAD	
CITY-ST-ZIP	MIAMI, FL 33129	
TITLE	SD	☐ Delete
NAME	CUELLAR, JESUS	
STREET ADDRESS	153 SW 22ND ROAD	
CITY-ST-ZIP	MIAMI, FL 33129	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CNA

Daytime Phone #

CR2E034 (10/02)