


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2008 08:00 A
Secretary of State

DOCUMENT # P04000106486 1. Entity Name 22-24 CARGO, INC.	
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Principal Place of Business 2750 SW 128TH AVE MIAMI, FL 33175	Mailing Address 2750 SW 128TH AVE MIAMI, FL 33175
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DO NOT WRITE IN THIS SPACE

04072008 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2508925	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ORTEGA, FRANCISCO A
2750 SW 128TH AVE
MIAMI, FL 33175

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

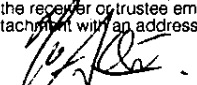
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000901061 04/29/08-80054-014 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ORTEGA, FRANCISCO A 2750 SW 128TH AVE MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ORTEGA, RENE X 5431 SW 150TH CT. MIAMI, FL 331854013
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S WINZELER, ZURITA 721 S.W. 102ND AVE. MIAMI, FL 33174
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ORTEGA, REINERIO 2711 SW 96 AVE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **04-12-08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #