## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 10, 2008 8:00 am Secretary of State

DOCUMENT # P07000014564  1. Entity Name CARGO TRADE INC.							03-10-2008 90064 046 ***150.00				
Principal Place of Business Mailing Address						בטטנה	•				
2440 CORAL WAY Miami, Fl. 33145			2440 CORAL WAY Miami, Fl. 33145					-	ب سیر	- · · <del>-</del> -	
							IRNII ABAN ABIN BBIN BBIN B		te Billio Billet Block	(BB)    1881	
Principal Place of Business - No P.O. Box # 3. Mailing Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02042008	Chg-P	CR2E03	4 (12/06)		
City & State			City & State			4. FEI Numbe 20 - 8	429439			plied For t Applicable	
Zip	Country		Zip Coun		stry	5. Certificate	of Status Desired		8.75 Addi ee Required		
	6. Name	and Address of Current				7. Name and Address of New Registered Agent					
PINO, RAUL F ESQ. 2440 CORAL WAY MIAMI, FL 33145					Name  Street Address (P.O. Box Number is Not Acceptable)						
					City			FL	Zip Code	,	
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 account the obligations of registered agent.										and accept	
SIGNATURE											
	Signature, lyped	or printed name of registered agent	and little is applicable. (NOT	E: Hegistere	ic Agent signature required	d when reinstating)		DATE			
		FEE IS \$150.00 8 Fee will be \$550.	ncing \$5	.00 May Be ded to Fees							
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFFIC	ERS AND	DIRECTORS	IN 11	
TITLE NAME	PSD RALSAM	O, JORGE	Delete	TITL NAM				ŕ	☐ Change	☐ Addition	
STREET ADDRESS	2440 COI				EET ADDRESS					.	
CITY-ST-ZIP	MIAMI, F	L 33145		CITY	r-ST-ZIP	······································					
TITLE NAME			☐ Delete	TITL					☐ Change	☐ Addition	
STREET ADDRESS					EET ADDRESS						
CITY-ST-ZIP		· ·		CITY	r-ST-ZIP						
TITLE NAME			☐ Delete	TITL NAM					Change	Addition	
STREET ADDRESS					EET ADDRESS						
CITY-ST-ZIP				CITY	Y-ST-ZIP						
TITLE			☐ Delete	TITL					☐ Change	Addition	
STREET ADDRESS					EET ADDRESS						
CITY-ST-ZIP				CITY	/-ST-ZIP				·		
TITLE			☐ Delete	TITL					☐ Change	☐ Addition	
					EET ADDRESS						
CITY-ST-ZIP				CITY	r-ST-ZIP						
TITLE			☐ Delete	TITL	1				☐ Change	Addition	
NAME CIRCET ADDRESS		1			1						
CITY-ST-ZIP				CITY	r-ST-ZIP						
12. I hereby of indicated of the cor	certify that th	ne information supplies with ort or supplier entit report is the receiver or tribitee and	this filing does not qualify for true and accurate and that	or the ex	emptions contained ature shall have the ired by Chanter 60	ed in Chapter 119 same legal effect	, Florida Statutes. I fit as if made under oas: and that my name	urther certi ath; that I a appears in	fy that the in m an officer Block 10 or	or director Block 11 if	
TOPGE BARCOMO PARTOR (200) P. P IGNU											
TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITL NAM STRI CITY	E ME EET ADDRESS (-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP TITLE				TITL NAM STRI CITY	E EET ADDRESS /- ST-ZIP E						
NAME STREET ADDRESS					EET ADDRESS						
					l						
				CITY	r-ST-ZIP						
	<del>                                     </del>		□ Doloto	TITI	F I				Chance	Addition	
		•		NAM	1						
STREET ADDRESS		1			EET ADDRESS						
		into	Albia filiana alaua		4	:- Ob1 615	Elevido Ptatuta - 17	ustbar == "	f. that the		
12. I hereby certify that the information supplies 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 supplier entities 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 of tribute ampowered 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:  2006 BalsomD  03/05/09  (305)854-1909											