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

Mailing Address 100 SE 2ND ST

MIAM! FL 33131-2100

17 FLOOR

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

100 SE 2ND ST

MIAMI FL 33131-1101

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

17 FLOOR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300005640 (6)

OVERSEAS LOGISTICS CORPORATION

01/25/1993 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0439489 21 Not Applicable 26 Suite, Apr. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation has liability for intangible tax under s. 199,032, 🗶 Yes 🗌 No 25 Florida Statutes 24 29 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FRIEDHOFF, JOHN H 81 Name 100 SE 2ND ST 82 Street Address (P.O. Box Number is Not Acceptable) 17TH FLOOR **MIAM! FL 33131** 83 84 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature intyping or precisal name of registered agent and little disciplicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. 12. Change Addition THLE DELETE 1.1 TITLE STANZIONE, FRANCO A NAME 1.2 NAME CR2E034 9020 NW 12TH ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY - ST - Z-P 14 CITY-ST-ZIP DVST DELETE Change Addition THLE 21 TITLE STANZIONE, FRANCO J 22 NAME NAME 9020 NW 12TH ST. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - \$T-ZIP City - St - ZIP DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST- 7IP DELETE ☐ Change Addition 5.1 THILE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CHTY - ST - 21P 5.4 City-St-ZIP DELETE 6.1 TITLE Change Addition TIT, F 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADORESS 64 CITY-ST-ZIP CITY St - 7-2 willy this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the receiver or trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify that the information supplied information indicated on this annual report or I am an officer or director of the corporation appears in Biock 12 or Block 13 if on an attachm<u>ent wit</u>t

FILED Feb 19 1997 8:00am Secretary of State



3a. Date of Last Report

3. Date Incorporated or Qualified