

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000010299 (4)			
1. Corporation Name GATEWAY FREIGHT SYSTEMS SOUTH, INC.			
Principal Place of Business 9190 N.W. 100 ST. MEDLEY FL 33178		Mailing Address PO BOX 52-7324 MIAMI FL 33152 US	
2. Principal Place of Business 21 9372 NW 101 St Suite, Apt. #, etc. 22 City & State 23 MEDLEY, FLA Zip 24 33178 Country 25 USA		2a. Mailing Address 26 9372 NW 101 St Suite, Apt. #, etc. 27 City & State 28 MEDLEY, FLA Zip 29 33178 Country 30 USA	
9. Name and Address of Current Registered Agent MAMONE, GRACE 1960 AUGUSTA TERR. CORAL SPRINGS FL 33071		10. Name and Address of New Registered Agent 81 Name JOHN MAMONE 82 Street Address (P.O. Box Number is Not Acceptable) 1960 AUGUSTA TERRACE 83 84 City CORAL SPRINGS FL 85 Zip Code 33071	
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 <i>John Mamone</i> JOHN MAMONE 6-30-98 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PSTD NAME MAMONE, GRACE STREET ADDRESS 1960 AUGUSTA TERR. CITY-ST-ZIP CORAL SPRINGS FL 33071	<input checked="" type="checkbox"/> DELETE	1.1 TITLE PSTD 1.2 NAME JOHN MAMONE 1.3 STREET ADDRESS 1960 AUGUSTA TERRACE 1.4 CITY-ST-ZIP CORAL SPRINGS, FL 33071	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME TORRES, RUBEN STREET ADDRESS 8025 S.W. 134 CT. CITY-ST-ZIP MIAMI FL 33183	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/03/1993

4. FEI Number

65-0391053

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

CR2E034 (5/98)

SIGNATURE:

John Mamone JOHN MAMONE Pres 6-30-98 (305) 888-8100