Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90065 038 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000015960

1. Corporation Name

MASTER TILE CARGO SERVICE, INC.

Principal Place of Business Mailing Address						I I I I I I I I I I I I I I I I I I I	1881 S1118 18)110 B1111 BE11 1081
2697 S.W. 33RD COURT 13461 S.W. 24TH STREET MIAMI FL 33133 MIAMI FL 33175 US						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed		
						03/02/1993		
·	ace of Business	2a. Mailing Address				4. FEI Number	\longrightarrow	Applied For Not Applicable
21 Suite, Apt. :	# atc	Suite, Apt. #, etc.				65-0390763		5 Additional
22]	m, etc.	27		خست		5. Certifcate of Status Desired		Required
City & State	9	City & State			_	6. Election Campaign Financing	\$5.0	0 May Be
23		28				Trust Fund Contribution	Adde	ed to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Inta		_
24	25		30			Personal Property Tax.	☐Yes	□No
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered	Agent	
RENI	DANA, PEDRO J			81	Name			
13461 S.W. 24TH STREET				82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33175				83				
								
				84	City	FL	85 Z	ip Code
agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligati Signature, typed or printed name of registered agent	ons of, Section 607.0505, Flor	ida Statu	utes.	signature required	n's board of directors. I hereby accept the appoint th		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	P	☐ DELETE	1.1 गरा				Chang	ge
NAME	BENDANA, PEDRO J.		1.2 NA			•		
STREET ADDRESS	13461 SW 24TH STREET				ADDRESS			
C/TY-ST-ZIP TITLE	MIAMI FL	☐ DELETE	1.4 CIT	TY-ST-	ZIP		☐ Chang	ge
NAME		, Depart	2.2 NA		-			, —
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	-			TY-ST		ng magani ungga at ni nangan mangga mangga si na		
TITLE		☐ DELETE	3.1 T∏	ΠLE			Chang	ge
NAME		•	3.2 NA	ME		·		
STREET ADDRESS			3.3 ST	REETA	ADDRÉSS .			
CITY-ST-ZIP				ITY-ST	-ZIP			Addition
TITLE		☐ DELETE	4.1 TIT				Chang	ge 🗌 Additior
NAME :			4. 2 N/					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TIT	TY-ST-	-217		Chang	ge
NAME			5.2 NA				_ `	
STREET ADDRESS			5.3 ST	REET A	ADDRESS			
CITY-ST-ZIP			5.4 CIT	TY-\$T-	-ZIP			
TITLE		☐ DELETE	6.1 TI	πE			☐ Chang	ge 🗌 Addition

14. 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 annual report of supplemental annual 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 13 if Grandet as a condensate that the condensate with all darks the condensate that the condensate t officer or director of the co Block 12 or Block 13 if on

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

NAME

CiTY-ST-ZIP