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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

FILED
Mar 31, 1999 8:00 am
Secretary of State
03-31-1999 90038 044 ***150.00

DOCUMENT # P93000021122

1. Corporation Name
C-AIR BROKERS & FORWARDERS, INC.

Principal Place of Business	Mailing Address
6176 NW 74TH AVE MIAMI FL 33166	6176 NW 74TH AVE MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 03/22/1993
4. FEI Number: 65-0399381 ☐ Applied For ☐ Not Applicable
5. Certifcate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. ☑ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

9. Name and Address of Current Registered Agent

HEID, MILTON
6176 NW 74TH AVE
MIAMI FL 33166

10. Name and Address of New Registered Agent

81	Name	STEVEN HEID
82	Street Address (P.O. Box Number is Not Acceptable)	6176 NW 74th AVE.
83		
84	City	MIAMI FL 85 Zip Code 33166

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 [signature] STEVEN HEID 3/22/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	VP ☐ Change ☑ Addition
NAME	MENDEZ, JOHN		1.2 NAME	STEVEN HEID
STREET ADDRESS	11875 SW 51 ST		1.3 STREET ADDRESS	6176 NW 74th AVE
CITY-ST-ZIP	MIAMI FL 33175		1.4 CITY-ST-ZIP	MIAMI, FL. 33166
TITLE	VP	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HEAD, MILTON		2.2 NAME	
STREET ADDRESS	245 DOLPHIN DR		2.3 STREET ADDRESS	
CITY-ST-ZIP	HEWETT NECI NY 11598		2.4 CITY-ST-ZIP	
TITLE	VP	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	ANTIC, GUS		3.2 NAME	
STREET ADDRESS	15850 90TH ST		3.3 STREET ADDRESS	
CITY-ST-ZIP	HOWARD BEACH NY 11414		3.4 CITY-ST-ZIP	
TITLE	VP	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	VALDES, CARLOS		4.2 NAME	
STREET ADDRESS	11027 SW 139 PL		4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (11/98)

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 or 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED [signature] STEVEN HEID 3/22/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #