## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT Secretary of State '  1996 DIVISION OF CORPORATIONS							
DOCUME 1. Corporation Nan	NT # <b>P93</b> 0	0002268	8 (4)				
NATIONAL	L FREIGHT SYSTEMS	S, INC.				1 10 E 10	80m 53m 13m 110m 110m 50m 14m 18m 18m
Principal Place of Business Mailing Address							
6122 N.W. 74TH MIAMI FL 33166 US		•	6122 N.W. 74TH CT. Miami Fl 33166 US			3. Date Incorporated or Qualified 3a. Date of Last Report 03/22/1993 01/31/1995	
						03/22/1993 4. FEI Number	
2. Principal Place	of Business		2a. Mailing Address			65-0401665	Not Applicable
Suite, Apt. #, et		Suite, Apr	. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22 Suite, Apr. #, 6	ю.	27					- ree nequired
City & State		City & Sta	nte			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
23		28	Т	Country		8. This corporation has liability for	
Zip	Country	Ζιρ <b>29</b> ,		30		Florida Statutes X Yes	s 🗍 No
24	25 9. Name and Address of C					10. Name and Address of New I	Registered Agent
· · · · · · · · · · · · · · · · · · ·	16			81		•	
COVARRU	COVARRUBIAS, ERNESTO JR				82 Street Address (P.O. Box Number is Not Acceptable)		
6501 NW							
STE. 190				83			
MIAMI FL 33166				84	City		FL 85 Zip Code
familiar with,	and accept the obligations of	dajed and the tajorate		Filigistere Ag		ration submits this statement for the plant of directors. Thereby accept the ap	GATE FICERS AND DIRECTORS IN 12
12.		RS AND DIRECTORS	DELETE	13. 1.130.6	——————————————————————————————————————	ADDITIONS OF INTEL® 1.0 S.	Change Addition
TITLE	PSTD STATE STATE		DELETE	1.2 NAME			
NAME	COVARRUBIAS, ERNES 432 S ROYAL PONCIA				T ADDRESS		
STREET ADDRESS	MIAMI SPRINGS FL 33			14 CUY			
CITY-S1-ZIP TITLE			DELETE	2 1 1111			Change Addition
NAME	DIRECTOR	TIDIAC CD		2 2 NAM			
STREFT ADDRESS	ERNESTO COVARR		n	L	ET ADDRESS		
CITY - ST - ZIF	432 S. ROYAL POINCIANA BLVD.		2 4 CITY 3 1 TITE			Change Addition	
TITLE	MIAMI SPRINGS, FLORIDA DELETE		3 1 IIIE 32 NAM			-	
NAME	TREASURER RENEE ROBERTS				ET ADDRESS		
STREET ADDRESS	19711 WHISPERI	NG PINES RD.	MIA, F		-SI ZIP		
City-St-ZiP	33157		) DEFELE	4 1 1111			Change Addition
NAME				4.2 NAM	ŧ		
STREET ADDRESS					ET ADDRESS		
CITY-ST-ZiP		· · · · · · · · · · · · · · · · · · ·	") No ere		-ST-Z-P	4 ~~~~	Change 🔲 Addition
11TLE		L	] DEFELE	5 1 THI 5 2 NAM		1000017 -04/26/960 ***200.00	1094607
NAME				1	EET ADDRESS	***588 BB	1001 001
STREET ADDRESS					(+\$1-ZIP	<b>ホ</b> ャホ <b>( ( ( ( ( ( ( ( ( (</b>	
CITY - ST - ZIP TITLE			DELETE	6 1 11			☐ Change ☐ Addition
NAME				6.2 NA*	dē .		<i>1</i> 22.
CTREET ADDRESS				63 STF	EFT ADDRESS		$\widetilde{L}$

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicaded on this annual report or supplemental armual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicaded on this annual report or supplemental armual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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.

SIGNATURE:

Pare Roberts Rever Roberts Telever 4/8/96

715 - 9494 Daytma Phone #

CR2E034 (12/95)