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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000071864 (1)

INTER-CARIBBEAN FREIGHT CORP.

FILED Apr 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					e seguiner une eftied elter Shift Rhitt	D 8 1)1 D W ILL 1 W (4) (188) (81) 8	ILII DIDI IZDI
820 S ST. RC		820 S ST RD 7						
PLANTATION FL 33317 US		PLANTATION FL 33317 US	PLANTATION FL 33317			DO NOT WRITE IN THIS SPACE		
55		00			3. Date Incorporated or Qualified		OI AIDE	
					10/18/1993			
2. Principal P	lace of Business	2a. Mailing Address	•		4. FEI Number		A	pplied For
21		26		65-0441390	65-044 1390		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75	Additional.
22		27	- · · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired		Fee F	tequired
City & State		City & State	 		6. Election Campaign Financing		\$5.00	May Be
23		······	28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cour	ntry	· ·	8. This corporation owes or has paid the current year Intangible		
24	9. Name and Address of Curre	29 Anni Registered Ament	30			Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent		
GO.		on trogistorous rigorit		81 Name	10. Hame and Address of Herri	Johisteien	waani	
GORDON, JAMES A 5651 S.W. 2ND ST.				Trains				
	NTATION FL 33317		Ì	82 Street	Address (P.O. Box Number is Not Accept	able)		
, ,	WINION I C 33317		ŀ	83		·-···		
			L					
			-	84 City		FI	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statu	utes, the ab	I ove-named	corporation submits this statement for the		t changing	its registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida, Such change was	authorized	by the con	corporation submits this statement for the poration's board of directors. I hereby acc	ept the ap	pointment a	s registered
SIGNATURE	The state of the s	iganoria di, occitori dor tosta, r	ionoa otati	1100.				
SIGNATURE	Signature, typod or printed name of registered a	igent and title if applicable (NC	1£ Registered	Agent signature	e required when reinstaling)	DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO	RS IN 12
TITLE	P	☐ DELETE	1.1 TIT	LE			Change	☐ Addition
NAME	GORDON, JAMES A		1.2 NA	ME				
STREET ADDRESS	5651 S.W. 2ND ST.		1.3 STF	EET ADDRESS				
CITY-ST-ZIP	PLANTATION FL 33317			Y-ST-ZIP				
TITLE	VP	☐ DELETE	2.1 T(T)				Change	Addition
NAME	GORDON, JAMES A. 5651-SW 2ND ST		2.2 NA					
STREET ADDRESS				ieet address				
CITY-ST-ZIP TITLE	PLANTATION FL	DELETE		Y-ST-ZIP			T 05	C Marrie
NAME		□ otreit	3 1 111				☐ Change	☐ Addition
STREET ADDRESS			3.2 NAI					
CITY-ST-ZIP				REET ADORESS				ľ
TITLE		DELETE	3.4. CI	Y-ST-ZIP			Change	Addition
NAME		La occeit	4. 2 NA				- Unange	L Addition
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		DELETE	5.1 TITE				Change	Addition
NAME			5.2 NA					
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		☐ DELETE	6.1 TITU				☐ Change	Addition
NAME			6.2 NA	AE				
STREET ADDRESS			63 STR	EET ADDRESS				
CITY-ST-ZIP				V-\$T.7IP				

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 express.