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

PROFIT **CORPORATION** ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED May 13 1998 8:00am

	1998	 /	ORPORATIONS	Secretary	of State
l .	MENT # P930(EXPRESS CARGO AND E		.		
					884 BIBLI (1812 HBL) BBL (1812
Principal Plac	e of Business	Mailing Address			9611 91811 81910 11911 BDH 1881
7545 N.W. 70TH STREET 7545 N.W. 70TH STREET MIAMI FL 33166					
MINMI LE 20100				DO NOT WRITE IN TH	S SPACE
				 Date Incorporated or Qualified 10/22/1993 	
2. Principal P	face of Business	2a. Mailing Address		4. FEI Number	Applied For
21	***	26		65-0471333	Not Applicable
Suite, Apt.	#, OIC.	Suite, Apt #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Z _I p	Country		Country	Trust Fund Contribution	Added to Fees
24	25	<u> </u>	30	This corporation owes or has paid the operation of the Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Registers	d Agent
	RNANDEZ, CRISTINA P		81 Name		ļ
			82 Street Add	ress (P.O. Box Number is Not Acceptable)	:
MIAMI FL 33165			83		
			0.0	tillwater Da.	85 Zip Code
44 6			LIA	мі Вбасн F	L 33/4/
office or r	to the provisions of Sections 607.0 registered agent, of both, in the Sta	1502 and 607.1508, Florida Statute ale of Florida. Such charge was a	is, the above-named corporal uthorized by the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
agent. Fa SIGNATURE		ligations or, Section 507/0505, Flo	rida Statutes.		
	Signature, typed or printed name of augistured		Registered Agent signature requi		
12. TITLE	PST OFFICERS A	AND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	DIAZ, HENRY		1.2 NAME		
STREET ADDRESS	7545 NW 70TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33186	☐ DELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE NAME		□ DECEIE	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	· · ·	Change Addition
NAME			3.2 NAME		ļ
STREET ADDRESS CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	,		4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE NAME		ר"ו מנרנוג	5.1 TITLE 5.2 NAME		Ti Andittoti
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-2W			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
14. I hereby o	certify that the information supplied	with this filing does not qualify for	f the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated	on this annual report or supplement	ntal annual report is true and accu	rate and that my signatu	ire shall have the same legal effect as if made	under oath; that I am an

earning report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a wer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in prinent with an address.