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

POCUMENT # P93000074937 (2)

FILED May 08 1998 8:00am Secretary of State

NETWORK FREIGHT FORWARDING SERVICES INC.			 	1 00 4 0 10 14010 1080 1 40 0 1 50 1	
Principal Place of Business Mailing Address 7852 NW 71 ST 7852 NW 71 ST MIAMI FL 33166 MIAMI FL 33166 US US			,	DO NOT WRITE IN THI	S SPACE
				 Date Incorporated or Qualified 10/28/1993 	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
2126				65-0451837	Not Applicable
Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
27					Fee Required
23	28	nga c		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country				8. This corporation owes or has paid the d	
24 25	29 3	0		Personal Property Tax due June 30.	Yes No
9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registere	d Agent
GUTIERREZ, ERNESTO					
7882 AW 71-61 73 45 Sus. 2 / B7		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 80100 33/55		83			
		64	City		85 Zip Code
				F	
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 register 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.					of changing its registered ppointment as registered
SIGNATURE					
Signature, typod or printed name of regulariad agent		Registered Age	nt signature requ	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE D OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
NAME QUINTERO, PABLO	_	1.2 NAME			7
STREET ADDRESS 5486 NW 105 CT		1.3 STREET ADDRESS			\ <u>{</u>
CITY-ST-ZIP MIAMI FL		1.4 CITY - ST - ZIP			
TITLE	154 DELETE	21 TITLE			Change Addition
HAME PEREZ, KARIN J					
STREET ADDRESS 10040 WINDIN CK-RD #201 CITY-ST-2IP SUNRISE FL		2.3 STREET : 2. 4 City-S		•	
CMY-ST-2IP SONIGSE PL	DELEFE 3111		I - ZIP		Change Addition
NAME ARTICES CIANE		32 NAME			
STREET ADDRESS 1300 SW 135 COURT	_	33 STREET	ADDRESS		
CITY-ST-ZIP MIAMI FL			T-ZIP		
TIPLE	☐ DELETE	4.1 TITLE			Change Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET	i		
CITY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE			Change Addition
NAME		5.2 NAME			
STREET ADDRESS	'	53 STREET	ADORESS		
City-51-ZIP		54 CITY-ST	i		
TITLE	☐ DELETÉ				Change Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET			
CITY-ST-ZIP 14. I hereby certify that the information supplied with	i this filing does not qualify for t	6.4 CITY - ST the exempt		n Section 119.07(3)(i), Florida Statutes. I further	certify that the information

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 eath; 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:

Poblo Vinter

04-28-98 (305) 599-1493