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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## POCUMENT # P93000076259 (9)

ULTRA CARGO LINES, INC.

Principal Place of Business Mailing Address 9935 N.W. B8TH AVE. 6906 NW 50 STREET MIAMI FL 33166 MEDLEY FL 33178-1450 3. Date Incorporated or Qualified 3a. Date of Last Report 11/03/1993 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0447411 1750 NW 96 Ave 26 Not Applicable 1750 N.W. 96 Ave Suite, Apt. #, etc Miami \$8,75 Additional Miami"fi. 5. Certificate of Status Desired Fee Required 27 City & State 33172 6. Election Campaign Financing \$5,00 May Be USA 33172 USA 23 28 Trust Fund Contribution Added to Fees Ζip Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PEREZ, FERNANDO PEREZ FERNANDO 6906 NW 50 STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 12 1750 N.W. 96 Ave **MIAMI FL 33168** 83 84 City Zip Code 33172 Miami F1. 11. Pursuant to the provisions of Sections 607 0602 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 Elorida. 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 appointment as registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) t and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)ND DIRECTORS 13. 12. DELETE Change ☐ Addition 1 1 TITLE ыне PEREZ, FERNANDO M CR2E034 1.2 NAME NAME 6906 NW 50 STREETT 1.3 STREET ADDRESS STREET ADDRESS MIAM! FL 1.4 CITY - ST - ZIP CITA: \$1 - 7IP Addition DELETE 2.1 TITLE Change TITLE 22 NAME NAM: 23 STREET ADDRESS STREET ADORESS 2 4 CITY - ST-ZIP CHTY - ST - ZP DELETE Addition Change 3171716 DILL NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CHY- \$1-205 DELETE Change ☐ Addition 4.1 TITLE TILLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CiTY-ST-ZIP CITY ST ZF DELETE Change Addition 51 TITLE THUE 52 NAME NAME

14. I do 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 influent report is frue 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 of the exemption of the receiver of the exemption and that my name appears in Block 12 or Block 13 if changed or of an extremal part with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

6.1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CID - 51 - 20

0174-51 712

THEF

NAME

SIGNATURE AND TYPET OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

43/97

(301) S13-152

Change

Addition

**FILED** 

Apr 09 1997 8:00am

Secretary of State

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