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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 05 1997 8:00am

Secretary of State

633-7997

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000076971 (9)

ALADDIN TRANSPORT, INC.

STREET ACIONESS

appears in Block 12 or F

SIGNATURE

City-St-Z-9

Principal Place of Business Mailing Address 3076 NW 18TH TER 3076 NW 18TH TER MIAMI FL 33125 MIAMI FL 33125-1104 3a. Date of Last Report 3. Date Incorporated or Qualified 11/08/1993 04/25/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0449543 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip 8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes No 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JOSEPH, ALLAN A ESQ 9200 S DADELAND BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 412 83 MIAMI FL 33156 84 City Zip Code 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 registered 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. Signification appeals printed name of registrate agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. 13. PST DELETE 1.1 TITLE Change ___ Addition TOTALE PENALVER, FLAVIA 1.2 NAME CR2E034 NAME 3076 NW 18 TERR 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-SI DELETE Change Addition TOLE 21 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS CHY-SU-ZIE 2.4 CITY-ST-ZIP DELETE Addition Change 3 1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CHY- ST- ZIP DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP City - ST- ZIP ■ DELETE Change Addition THLE 5.1 TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CHTY - ST - Z07 DELETE Addition Change TILE 6.1 TITLE 6.2 NAME NAME

> **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

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 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 directly of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

nent with an address.