

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90194 030 ***150.00

DOCUMENT # P93000082525

1. Corporation Name
CARIBBEAN TRUCKING, INC.

Principal Place of Business
3220 NW SOUTH RIVER DR.
MIAMI FL 33142

Mailing Address
3201 NW 24 ST. ROAD
MIAMI FL 33142



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1993

4. FEI Number

65-0453324

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMBROKOUPOULOS, JOHN
3201 NW 24TH STREET ROAD
MIAMI FL 33142

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE
NAME LAMBROKOUPOULOS, JOHN
STREET ADDRESS 3201 NW 24TH STREET ROAD
CITY-ST-ZIP MIAMI FL 33142

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE S ☐ DELETE
NAME DIAZ, LILIA A
STREET ADDRESS 3201 NW 24TH STREET ROAD
CITY-ST-ZIP MIAMI FL 33142

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE T ☐ DELETE
NAME ISERN, JORGE E
STREET ADDRESS 3201 NW 24TH STREET ROAD
CITY-ST-ZIP MIAMI FL 33142

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE AS ☐ DELETE
NAME MONOCANDILLOS, THEODORA
STREET ADDRESS 3201 NW 24TH STREET ROAD
CITY-ST-ZIP MIAMI FL 33142

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE VP ☐ DELETE
NAME OSORNO, JORGE
STREET ADDRESS 3201 NW 24 ST. ROAD
CITY-ST-ZIP MIAMI FL 33142

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 address, with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director
Jorge Isern / Treasurer

APR 28 1999

(305) 637-8963

CR2E034 (11/98)