**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL -3 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000003136 (6)

1. Corporation Name
CARGOLINK INTERNATIONAL, INC.

Principal Place of Business
12461 SW 97 STREET
MIAMI FL 33186

Mailing Address
12461 SW 97 STREET
MIAMI FL 33186

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/13/1994
3a. Date of Last Report:

2. Principal Place of Business
21 1401 N.W. 78th AVE.
Suite, Apt. # etc.
22 STE. 201
City & State
23 MIAMI , FL.
Zip 24 33126 Country 25 DADE

2a. Mailing Address
26 1401 N.W. 78th AVE.
Suite, Apt. # etc.
27 STE. 201
City & State
28 MIAMI, FL.
Zip 29 33126 Country 30 DADE

4. FEI Number: 65-0459408 — 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 has liability for intangible tax under F.S. 607.1622, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
LAW FIRM OF LAWRENCE J. SPIEGEL,CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
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: (If the registered agent is a corporation, this must be signed by an officer.) (If the Registered Agent is an individual, this must be signed by that individual.) DATE

12. OFFICERS AND DIRECTORS

| | |
|---|---|
| 01 TITLE | P |
| 02 NAME | BAEZ, NORMAN C |
| 03 STREET ADDRESS | 9031 SW 92 COURT |
| 04 CITY, ST, ZIP | MIAMI FL 33176 |
| 11 TITLE | |
| 12 NAME | |
| 13 STREET ADDRESS | |
| 14 CITY, ST, ZIP | |
| 21 TITLE | |
| 22 NAME | |
| 23 STREET ADDRESS | |
| 24 CITY, ST, ZIP | |
| 31 TITLE | |
| 32 NAME | |
| 33 STREET ADDRESS | |
| 34 CITY, ST, ZIP | |
| 41 TITLE | |
| 42 NAME | |
| 43 STREET ADDRESS | |
| 44 CITY, ST, ZIP | |
| 51 TITLE | |
| 52 NAME | |
| 53 STREET ADDRESS | |
| 54 CITY, ST, ZIP | |
| 61 TITLE | |
| 62 NAME | |
| 63 STREET ADDRESS | |
| 64 CITY, ST, ZIP | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|---|---|
| 11 TITLE | ☐ Change ☒ Addition |
| 12 NAME | P |
| 13 STREET ADDRESS | SUAREZ,ALEJANDRO J. |
| 14 CITY, ST, ZIP | 12461 S.W. 97th STREET |
| | MIAMI , FL. 33186 |
| 21 TITLE | ☐ Change ☒ Addition |
| 22 NAME | V |
| 23 STREET ADDRESS | BAEZ,NORMAN C. |
| 24 CITY, ST, ZIP | 9031 S.W.92 COURT |
| | MIAMI , FL. 33176 |
| 31 TITLE | ☐ Change ☐ Addition |
| 32 NAME | |
| 33 STREET ADDRESS | |
| 34 CITY, ST, ZIP | |
| 41 TITLE | ☐ Change ☐ Addition |
| 42 NAME | |
| 43 STREET ADDRESS | |
| 44 CITY, ST, ZIP | |
| 51 TITLE | ☐ Change ☐ Addition |
| 52 NAME | |
| 53 STREET ADDRESS | |
| 54 CITY, ST, ZIP | |
| 61 TITLE | ☐ Change ☐ Addition |
| 62 NAME | |
| 63 STREET ADDRESS | |
| 64 CITY, ST, ZIP | |

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 is not contained with an address.

SIGNATURE: ALEJANDRO J. SUAREZ 04-29-95
(Signature of a Florida officer or director) (Typed or printed name of Florida officer or director) (Date)

REMITTED BY MAIL 94L2737

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6-28-95

DO NOT WRITE OR MAKE ANY MARKS ON THIS STUB

DO NOT DETACH THIS STUB