FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000004777 (6)**

1. Corporation Name

LATAM TRUCKING CORP.

Principal Place of Business	Mailing Address
11903 N.W. 102 RD MEDLEY FL 33178	11903 N.W. 102 RD MEDLEY FL 33178

2. Principal Place of Business 21 11500 N.W. SO. RIVER DR.	2a. Mailing Address 26 11500 NW SO. RIVER DR.
Suite, Apt. #, etc. 22 B	Suite, Apt. #, etc. 27 B
City & State 23 MEDLEY FL.	City & State 28 MEDLEY FL.
Zip 24 33178	Country 25 DADE
Zip 29 33178	Country 30 DADE

3. Date Incorporated or Qualified 01/20/1994	3a. Date of Last Report 03/17/1995
4. FEI Number 65-0460650	☐ 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 s. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

CABRERA, ROLANDO A
11903 NW 102 RD
MEDLEY FL 33178

10. Name and Address of New Registered Agent

81 Name ROLANDO A. CABRERA
82 Street Address (P.O. Box Number is Not Acceptable) 11500 NW. SO. RIVER DR. STE B
83
84 City MEDLEY FL 85 Zip Code 33178

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPVS ☐ DELETE	1.1 TITLE	DP ☐ Change ☐ Addition
NAME	CABRERA, ROLANDO A	1.2 NAME	ROLANDO A. CABRERA
STREET ADDRESS	11903 NW 102 RD	1.3 STREET ADDRESS	11500 N.W. SO. RIVER DR. STE B.
CITY-ST-ZIP	MEDLEY FL 33178	1.4 CITY-ST-ZIP	MEDLEY FL. 33178
TITLE	☐ DELETE	2.1 TITLE	VS ☐ Change ☐ Addition
NAME		2.2 NAME	ELENA GONZALEZ
STREET ADDRESS		2.3 STREET ADDRESS	2755 SW 34 AVE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI FL. 33133
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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)(k), 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.

SIGNATURE: Rolando A. Cabrera ROLANDO A. CABRERA 1-29-96 305-824-0622
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)