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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED

Apr 29 1998 8:00am

Secretary of State

1		CARGO SERVIC		r (Z)						
Principal Pina	n ni Buninon		Mailina Add	*****						
Principal Place of Business Mailing Address										
4451 N.W. 36TH ST. 4451 N.W. 36TH ST. #102										
MIAMI SPRIN	GS FL 33166			MIAMI SPRINGS FL 33166			DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified	1 '		
				I de Marie Addina			02/14/1994	l set		
2. Principal P	lace of Busin	ess	F	2a. Maiting Address			4. FEI Number	 	Applied For	
21 Suite, Apt.	# elc		26 Suite An	Suite, Apt. #, etc.			65-0467008	¢0.70	Not Applicable Additional	
22	,, oto.			27			5. Certificate of Status Desired		Required	
City & State	e			City & State			6. Election Campaign Financing		May Be	
23			28	28			Trust Fund Contribution			
Zip	Country		Z _i p	Z _I p		/	8. This corporation owes or has p	aid the current year	Intangible	
24	25		[29]				Personal Property Tax due June 30. Ma Yes No			
	····	and Address of Curr	ent Registered Age	ent	81	Name	10. Name and Address of New R	egistered Agent		
COREA, BLANCA						Ivaille				
1	51 N W 36TH	1 81					dress (P.O. Box Number is Not Accepta	ble)		
#102 MIAMI SPRINGS FL 33166					83					
MIAMI SPRINGS PL 33100										
					84	City		FL 85 Zi	p Code	
11. Pursuant	to the provisi	ons of Sections 607.0	502 and 607.1508, F	Iorida Statute	es, the abov	e-narned co	rporation submits this statement for the	purpose of changing	its registered	
agent. La	egi ster ed ag ım fam iliar wit	ont, or both, in the Sta th, and accept the obt	не от попаа. Such d ligations of, Section (nange was a 607.05 0 5, Flo	iutnorizea by irida Statute:	y the corpor s.	ration's board of directors. I hereby acce	pt the appointment a	as registered	
SIGNATURE										
12.	Signature, typed	or printed many of registered r	agent and bille if applicable. AND DIRECTORS	(NO1E	Hegistered Age	ent signature req	wired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTO	OBS IN 12	
TITLE	5	OFFICERS		DELETE	1.1 TITLE		ADDITIONS/CITANGES TO OFF	Change		
NAME	_	BLANCA	_	1.2						
STREET ADDRESS 614 SANTANDER #1						ADDRESS				
CITY-ST-ZIP CORAL GABLES FL 33134				1.4						
TITLE	\$D			DELETE	2.1 TITLE			☐ Change	e Addition	
NAME	COREA, CARLOS			2						
STREET ADDRESS		ITANDER #1			2.3 STREET	ADDRESS				
CITY-ST-ZIP		GABLES FL 33134				ST-ZIP				
TITLE	TD	0404	L	J DELETÉ	3.1 TITEF			∐ Changi	e	
NAME	COREA, SARA DORESS 4314 S.W. 12TH ST.			3.3				-		
STREET ADDRESS	4314 5.1 MIAMI FI				3.3 STREET					
CITY+ST-ZIP TITLE	PD	L 33134	т	DELETE	3.4. CHTY-5 4.1 TITLE	SI-ZIP	· · · · · · · · · · · · · · · · · · ·	Change	e Addition	
NAME	ÇOREA,	IRELICE		J Decert	4. 2 NAME			orange	7 (00/00/1	
STREET ADDRESS		ITANDER #1			4.3 STREET					
CITY-ST-ZIP		GABLES FL 33134			4.4 CITY-S					
TITLE			T	DELETE	5.1 TITLE			☐ Change	e Addition	
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREET	ADDRESS				
CITY-ST-ZIP					5.4 C/TY- S	ST-ZIP				
TITLE				DELETE	61 THILE			Change	e 🔲 Addition	
NAME					62 NAME					
STREET ADDRESS					63 STREET				1	
CITY-ST-ZIP			and the contract of the second second second second second		6.4 CITY - S	T-71P				

Thereby 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 a grant and dress.