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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000043002 (2)

1. Corporation Name:

MULTICARGO, INC.



Principal Place of Business

1237 N.W. 93 CT.
MIAMI FL 33172

Mailing Address

1237 N.W. 93 CT.
MIAMI FL 33172

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

ROUSSO, MARK E
9350 S. DIXIE HWY.
PENTHOUSE 2
MIAMI FL 33156

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 Section 607.07, 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 607.05(2), Florida Statutes.

SIGNATURE

SIGNATURE OF REGISTERED AGENT (SEE INSTRUCTIONS)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVST
NAME MONTENEGRO, ROBERTO
STREET ADDRESS 1237 N.W. 93 CT.
CITY-STATE-ZIP MIAMI FL 33172

[] DELETE

TITLE D
NAME MONTENEGRO, ROBERTO
STREET ADDRESS 1237 N.W. 93 CT.
CITY-STATE-ZIP MIAMI FL 33172

[] DELETE

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TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

[] DELETE

14. I do hereby certify that the information supplied with this filing is truthful, full and does not comply for the exemption state 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 that my name or business name is proposed to be on the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, or on all amendments thereto.

SIGNATURE:

Robert Montenegro
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(404) 5977805

CR2E034 (12/95)