

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000049845 (8)**

1. Corporation Name
SYSTEM FREIGHT CORP.



Principal Place of Business
**5220 NW 72ND AVENUE BAY 35
MIAMI FL 33166**

Mailing Address
**5220 NW 72ND AVENUE BAY 35
MIAMI FL 33166**

3. Date Incorporated or Qualified **06/30/1994** 3a. Date of Last Report **05/01/1995**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRANCIS, CECILIA
5220 NW 72ND AVENUE BAY 35
MIAMI FL 33166

81 Name **MAURICIO MENDOZA**
82 Street Address (P.O. Box Number is Not Acceptable)
9050 NW 192 TR.
83
84 City **Miami, FL 33015** FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and date of application

Signature typed or printed name of registered agent and date of application

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	FRANCIS, CECILIA	☒ DELETE
NAME		17021 NO. BAY ROAD APT. 620	
STREET ADDRESS		MIAMI FL 33160	
CITY-ST-ZIP			
TITLE	VD	MENDOZA, MAURICIO	☐ DELETE
NAME		15650 BULL RUN ROAD APT. 504J	
STREET ADDRESS		MIAMI LAKES FL 33014	
CITY-ST-ZIP			
TITLE	TD	HERNANDEZ, AMALIA	☒ DELETE
NAME		280 SW 129TH AVENUE	
STREET ADDRESS		MIAMI FL 33184	
CITY-ST-ZIP			
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Ernesto Hernandez	☐ Change ☒ Addition
1.2 NAME	280 S.W. 129 AVENUE	
1.3 STREET ADDRESS	Miami, FL 33184	
1.4 CITY-ST-ZIP		
2.1 TITLE	MENDOZA MAURICIO (Presidente)	☒ Change ☐ Addition
2.2 NAME	9050 N.W. 192 TR	
2.3 STREET ADDRESS	Miami, FL 33015	
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME	800001839238	
4.3 STREET ADDRESS	-05/24/96--01103--003	
4.4 CITY-ST-ZIP	***208.75	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME	200001839242	
5.3 STREET ADDRESS	-05/24/96--01103--004	
5.4 CITY-ST-ZIP	***25.00	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/24/96

Daytime Phone #

CR2E034 (12/95)