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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 20 1996 8:00 am
Secretary of State

DOCUMENT # P94000050569 (0)

1. Corporation Name

ICARUS AIR CARGO, INC.



Principal Place of Business

Mailing Address

6617 N.W. 84TH AVE.
MIAMI FL 33166

6617 N.W. 84TH AVE.
MIAMI FL 33166

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

SEEWALD, CRAIG W
7750 FARRAGUT STREET
HOLLYWOOD FL 33024

81 Name

TERESA M. WHITE-

82 Street Address (P.O. Box Number is Not Acceptable)

391 EAST DRIVE

83

MIAMI SPRINGS FL 33166

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

Teresa M. White

(NOTE: Registered Agent signature required when reinstating)

January 31, 1996.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

P
NAME WHITE, TERESA M
STREET ADDRESS 391 EAST DRIVE
CITY, ST, ZIP MIAMI SPRINGS FL

TITLE ☒ DELETE

V
NAME MAGNOLE, JOSEPH V
STREET ADDRESS 1100 NW 93 AVE
CITY, ST, ZIP PEMBROKE PINES FL

TITLE ☒ DELETE

ST
NAME SEEWALD, CRAIG W
STREET ADDRESS 7750 FARRAGUT ST.
CITY, ST, ZIP HOLLYWOOD FL

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY, ST, ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

V/S

GARCIA, GIL O

391 EAST DRIVE

MIAMI SPRINGS FL

P/T

WHITE, TERESA M

391 EAST DRIVE

MIAMI SPRINGS FL 33166

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

Gil O. Garcia

January 31, 1996

Date

Daytime Phone

0. (305) 541 3975

0. (305) 884-7491

CR2E034 (12/95)