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

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP

FILED Mar 03 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS P94000050569 (0) DOCUMENT # ICARUS AIR CARGO, INC. Principal Place of Business Mailing Address 6617 N.W. 84TH AVE. 6617 N.W. 84TH AVE. MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/05/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0503761 Not Applicable 4079 NW 79th AVENUE 4079 NW 79th AVENUE \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing MIAMI, FLORIDA 28 MIAMI, FLORIDA Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has pald the current year Intangible 24 Personal Property Tax due June 30. 33166 25 USA 33166 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WHITE, TERESA M. WHTTE, TERESA M Street Address (P.O. Box Number is Not Acceptable) 391 EAST DRIVE 82 MIAMI SPRINGS FL 33166 10940 NW 58th TERRACE 83 City Zip Code MIAMI, FL 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE WHITE, TERESA M NAME 1.2 NAME WHITE, TERESA M. 391 EAST DRIVE STREET ADDRESS 1.3 STREET ADDRESS 10940 NW 58th TERRACE MIAMI, FLMIAMI SPRINGS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change P Addition DELETE TITLE 2.1 TITLE GARCIA, GIL O. NAME 2.2 NAME GARCIA, GIL O. **391 EAST DRIVE** 10940 NW 58th TERR. MIAMI, FL.33178 STREET ADDRESS 2.3 STREET ADDRESS MIAMI SPRINGS FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition WHITE TERESA M. NAME 3.2 NAME 391 EAST DRIVE STREET ADDRESS 3.3 STREET ADDRESS (Duplicate) **MIAMI SPRINGS FL** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change TITLE 4 1 TITLE noitibh GELASIO, ROMO JR. NAME 4.2 NAME 675 WEST 40TH PLACE STREET ADDRESS 4.3 STREET ADDRESS HIALEAH FL 33112 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-2IP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME

6.3 STREET ADDRESS

White 1088 2/198 205/591-3935

6.4 CITY - ST - ZIP 14. I hereby 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

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