FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **P94000086379 (2)**

1. Corporation Name
B.Q.S. CARGO CORP.

Principal Place of Business
8308 NW 68 STREET
MIAMI FL 33166

Mailing Address
8308 NW 68 STREET
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/29/1994**
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 65-0536793 — Applied For / Not Applicable

Suite, Apt #, etc. (22) — Suite, Apt #, etc. (27)
5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required

City & State (23) — City & State (28)
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

Zip (24) — Country (25) — Zip (29) — Country (30)
8. *This corporation has liability for intangible tax under § 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GRANADOS, FERNANDO
8308 NW 68 STREET
MIAMI FL 33166

10. Name and Address of New Registered Agent

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 Sections 607.0507 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 resigning) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	GRANADOS, FERNANDO	1.2 NAME	
STREET ADDRESS	8308 NW 68 STREET	1.3 STREET ADDRESS	
CITY ST ZIP	MIAMI FL 33166	1.4 CITY ST ZIP	
TITLE	VTD	2.1 TITLE	☐ Change ☐ Addition
NAME	SARRIA, DIEGO J	2.2 NAME	
STREET ADDRESS	CALLE 13C #75-95 CASA #7	2.3 STREET ADDRESS	
CITY ST ZIP	CALI COLOMBIA	2.4 CITY ST ZIP	
TITLE	VSD	3.1 TITLE	☐ Change ☐ Addition
NAME	PIRAQUIVE, BEYMAR	3.2 NAME	
STREET ADDRESS	8302 NW 7 STREET	3.3 STREET ADDRESS	
CITY ST ZIP	MIAMI FL 33126	3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		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 is in an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (305) 594-4497 Daytime Phone #

0179233 CP