

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000004278 (4)

1. Corporation Name

YELLOW INTERAMERICAN CORP.



Principal Place of Business

Mailing Address

17980 N.E. 31ST CT.
1315
MIAMI FL 33160

17980 N.E. 31ST CT.
1315
MIAMI FL 33160

3. Date Incorporated or Qualified

3a. Date of Last Report

01/17/1995

4. FEI Number

Applied For

Not Applicable

65-0547199

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

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

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DE SOUZA, SYLVIO L
17980 N.E. 31ST CT.
1315
MIAMI FL 33160

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 607.0502 and 607.1505, 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

Margareth Souza

(NOTE: Registered Agent Signature required when registration)

1/23/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PSD	DE SOUZA, SYLVIO L	17980 N.E. 31ST CT.	MIAMI FL 33160	☐
VTD	SOUZA, MARGARETH	17980 N.E. 31ST CT.	MIAMI FL 33160	☐
				☐
				☐
				☐
				☐

1-1 TITLE	1-2 NAME	1-3 STREET ADDRESS	1-4 CITY-ST-ZIP	Change	Addition
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	☐	☐

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:

Margareth Souza

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/96

305 931-9395

DATE: PHONE #

CR2E034 (12/95)