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May 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000007352 (4)

1. Corporation Name
IMPEX CARGO, INC.

Principal Place of Business
5528 NW 101 CT
MIAMI FL 33178

Mailing Address
5528 NW 101 CT
MIAMI FL 33178-2642

3. Date Incorporated or Qualified 01/27/1995
3a. Date of Last Report 03/19/1996

2. Principal Place of Business
21 7661 NW 68 ST
Suite, Apt. #, etc.
22 Suite # 105
City & State
23 Miami FL
Zip
24 33166 Country
25 USA

2a. Mailing Address
26 7661 NW 68 ST
Suite, Apt. #, etc.
27 Suite 105
City & State
28 Miami FL
Zip
29 33166 Country
30 USA

4. FEI Number 65-0553276
Applied For
Not Applicable

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

9. Name and Address of Current Registered Agent

NADER, YAMIL
5528 NW 101 CT
MIAMI FL 33178

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code 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 _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	NADER, YAMIL	
STREET ADDRESS	5528 NW 101 CT	
CITY - ST - ZIP	MIAMI FL 33178	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	NADER, FARITH	
STREET ADDRESS	5528 NW 101 CT	
CITY - ST - ZIP	MIAMI FL 33178	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	NADER, ZAMIR	
STREET ADDRESS	5528 NW 101 CT	
CITY - ST - ZIP	MIAMI FL 33178	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	NADER Farith
2.3 STREET ADDRESS	8590 NW 1 TERR
2.4 CITY - ST - ZIP	MIAMI FL 33126
3.1 TITLE	DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ZAMIR Nader
3.3 STREET ADDRESS	8343 Lake Drive Apt K306
3.4 CITY - ST - ZIP	MIAMI FL 33166
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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 Block 12 or Block 13 if changed or in an attachment with an address.

SIGNATURE:

Yamil Nader

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/19/97 (305) 885-9050

Date Daytime Phone #

CR2E034 (9/96)