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Apr 15 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 # P95000012360 (0)

1. Corporation Name
NAMCO TERMINAL SERVICES CORP.

Principal Place of Business

6990 NW 97TH AVENUE
MIAMI FL 33178

Mailing Address

6990 NW 97TH AVENUE
MIAMI FL 33178-2500

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 City & State

23

24 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State

28

29 Zip

Country

30

9. Name and Address of Current Registered Agent

D'AZEVEDO, THOMAS
6990 NW 97TH AVENUE
MIAMI FL 33178

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 607.1508, 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 (Type or print name of registered agent, if applicable)

(If not applicable, sign name of registered agent, if applicable)

DATE

OFFICERS AND DIRECTORS

12. ☐ DELETE

TITLE P
NAME DAZEVEDO, MICHELLE
STREET ADDRESS 5301 SW 163RD AVE.
CITY-ST-ZIP FT LAUDERDALE FL 33331

☐ DELETE

TITLE V
NAME DAZEVEDO, SANDRA
STREET ADDRESS 5301 SW 163RD AVE.
CITY-ST-ZIP FT LAUDERDALE FL 33331

☐ DELETE

TITLE V
NAME DAZEVEDO, BILLYE
STREET ADDRESS 5301 SW 163RD AVE.
CITY-ST-ZIP FT LAUDERDALE FL 33331

☐ DELETE

TITLE TS
NAME DAZEVEDO, THOMAS
STREET ADDRESS 5301 SW 163RD AVE.
CITY-ST-ZIP FT LAUDERDALE FL 33331

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 NAME

13.2 STREET ADDRESS

13.3 CITY-ST-ZIP

13.4 CITY-ST-ZIP

21.1 NAME

21.2 STREET ADDRESS

21.3 CITY-ST-ZIP

21.4 CITY-ST-ZIP

21.5 NAME

21.6 STREET ADDRESS

21.7 CITY-ST-ZIP

21.8 CITY-ST-ZIP

21.9 NAME

21.10 STREET ADDRESS

21.11 CITY-ST-ZIP

21.12 CITY-ST-ZIP

21.13 NAME

21.14 STREET ADDRESS

21.15 CITY-ST-ZIP

21.16 CITY-ST-ZIP

21.17 NAME

21.18 STREET ADDRESS

21.19 CITY-ST-ZIP

21.20 CITY-ST-ZIP

21.21 NAME

21.22 STREET ADDRESS

21.23 CITY-ST-ZIP

21.24 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)(b), 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 Thomas Dazevedo 11/1/97 2155912281

CR2E034 (9/96)