

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

FILED

May 14 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 # P95000018958 (5)
1. Corporation Name

TRANSPORTES ALFERMA, INC.



Principal Place of Business

Mailing Address

12989 S.W. 251ST TERRACE
MIAMI FL 33032

12989 S.W. 251ST TERRACE
MIAMI FL 33032-5788

3. Date Incorporated or Qualified

3a. Date of Last Report

03/08/1995

04/20/1996

4. FEF Number

Applied For

65-0563649

Not Applicable

6. 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

10. Name and Address of New Registered Agent

FERNAANDEZ, OSCAR
25240 SW 124 CT.
MIAMI FL 33032

81 Name

FERNANDO RODRIGUEZ

82 Street Address (P.O. Box Number is Not Acceptable)

12989 S.W. 251 ST TERRACE

83

84 City

HOMESTEAD

FL

85 Zip Code

33032

11. Pursuant to the provisions of Sections 607.0602 and 607.1608, 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 607.0606, Florida Statutes.

SIGNATURE: *[Signature]*
Signature, typed or printed name of registered agent and title, if applicable

February, 18th, 1997

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: DP
NAME: JIMINEZ, FERNANDO R
STREET ADDRESS: 12989 S.W. 251ST TERRACE
CITY - ST - ZIP: MIAMI FL 33032

1.1 TITLE: Change Addition
1.2 NAME:
1.3 STREET ADDRESS:
1.4 CITY - ST - ZIP:

TITLE: D
NAME: DIAZ, ROLANDO
STREET ADDRESS: 12989 S.W. 251ST TERRACE
CITY - ST - ZIP: MIAMI FL 33032

2.1 TITLE: Change Addition
2.2 NAME:
2.3 STREET ADDRESS:
2.4 CITY - ST - ZIP:

TITLE: D
NAME: PIZARRO, MARIA R
STREET ADDRESS: 12989 S.W. 251ST TERRACE
CITY - ST - ZIP: MIAMI FL 33032

3.1 TITLE: Change Addition
3.2 NAME:
3.3 STREET ADDRESS:
3.4 CITY - ST - ZIP:

TITLE: DVP
NAME: FERNANDEZ, OSCAR
STREET ADDRESS: 25240 SW 124 CT.
CITY - ST - ZIP: MIAMI FL 33032

4.1 TITLE: Change Addition
4.2 NAME: CABEZAS, George L.
4.3 STREET ADDRESS: 12989 SW 251 ST TERRACE
4.4 CITY - ST - ZIP: MIAMI, FL, 33032

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

5.1 TITLE: Change Addition
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY - ST - ZIP:

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

6.1 TITLE: Change 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 on an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 18th, 1997

Date

Daytime Phone #

CR2E034 (9/96)