FILE NOW: FILING FEE AFTER MAY 1ST IS \$550:00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000032565 (0)

41 FREIGHT FORWARDERS INC.

FILED May 06 1998 8:00am Secretary of State



			<u> </u>	
Principal Place of Business	Mailing Address			
4795 NW 72ND AVE. 4795 NW 72ND AVE. MIAMI FL 33166 MIAMI FL 33166		DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualified	7 SI AGE
			04/24/1995	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
The state of the s	<u>⊢</u> -,		1	Not Applicable
Sulte, Apt. #, etc.	26 Suite, Apt. #, etc.		65-0578509	\$8.75 Additional
			5. Certificate of Status Desired	Fee Regulred
27			6 Floring Compaign Financies	\$5.00 May Be
23	28		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the ci	
24 25		30	Personal Property Tax due June 30.	Yes No
9, Name and Address of Curre		<u> </u>	10. Name and Address of New Registered	
HTBAK, ABAUIA			SCIMENTO JOSE	
4795 NW 72ND AVE.			ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33166		83	95 NW 72ND AVE.	
,		83		
		84 City	+ > > / T	85 Zip Code 33166
		M	IAMI FI	<u> 33166</u>
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.				
agent. I am landiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE AN //O/Wil -50	ISE NASCIMENT	o- PLESIO	DENT	2776
Prohiture Typed or printed harne of registered as	· · · · · · · · · · · · · · · · · · ·	Registered Agent signature requi		ID DIDECTORS IN 40
	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE PVST	DELETE		PVST	A CHANGE TO MUNITION
NASCIMENT, JOSE O		1.2 NAME	NASCIMENTO JOSE	
STREET ADDRESS 7650 HARDING AVE., APT 1	IUA	1.3 STREET ADDRESS	100 BAYVIEW DRIVE APT	410
CITY-ST-ZIP MIAMI BEACH FL 33141		1.4 CITY-ST-ZIP	MIAMITBEACH, FL. 33160	
TITLE	☐ DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY - ST - ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CiTY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5 4 CITY-ST-ZIP		
TITLE	DELETE	61 THILE		Change Addition
NAME		6.2 NAME		-
STREET ADDRESS		6.3 STREET ADDRESS		ļ
CITY-ST-ZIP		6.4 CITY - ST - ZIP		

14. I 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 attackment with an address.