

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000053466

FILED  
Aug 25, 2004  
Secretary of State

Entity Name: MULTICARGA INTERNATIONAL CORP.

## Current Principal Place of Business:

8298 NW 68 ST  
MIAMI, FL 33166

## New Principal Place of Business:

8444 NW 66TH STREET  
MIAMI, FL 33166

## Current Mailing Address:

8298 NW 68 ST  
MIAMI, FL 33166

## New Mailing Address:

8444 NW 66TH STREET  
MIAMI, FL 33166

FEI Number: 65-0593849

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

RAMIREZ, ALIRIO J  
10075 NW 51ST TERRACE  
MIAMI, FL 33198 US

## Name and Address of New Registered Agent:

RAMIREZ, ALIRIO J  
10075 NW 51ST TERRACE  
MIAMI, FL 33178 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

08/25/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RAMIREZ, ALIRIO J  
Address: 8298 NW 68 ST  
City-St-Zip: MIAMI, FL 33166

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RAMIREZ, ALIRIO J  
Address: 10075 NW 51ST TERRACE  
City-St-Zip: DORAL, FL 33178 US

Title: VP ( ) Change (X) Addition  
Name: RAMIREZ, ANDREA M  
Address: 10075 NW 51ST TERRACE  
City-St-Zip: DORAL, FL 33178 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. RAMIREZ

P

08/25/2004

Electronic Signature of Signing Officer or Director

Date