SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96; \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P95000073380 (4) DOCUMENT # AMA TRANSPORT, INC. Mailing Address Principal Place of Business 9595 NW 89TH AVE. 9595 NW 89TH AVE. MIAMI FL 33117 MIAMI FL 33117 3a. Date of Last Report 3. Date Incorporated or Qualified 09/20/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0612648 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees MIAMI, FLA. MIAMI, FLA. Trust Fund Contribution 23 28 8. This corporation has liability for intangible tax under s. 199 032, Country Country Zιρ Yes No 33178 30 DADE Florida Statutes 33178 25 DADE 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name OTERO, VICTOR MORENO, ANGEL Street Address (P.O. Box Number is Not Acceptable) 9595 NW 89TH AVE. 82 9595 NW 89th Avenue MIAM! FL 33117 Zip Code 33178 85 84 City Miami 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 of both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and appointment of providing of Section 607,0505, Florida Statutes. 11 Pursuant to the provisions of 6/10/96 Victor Otero **SIGNATURE** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3/96) OFFICERS AND DIRECTORS 13. 12. X Change Addition 1 1 TITLE DELETE TITLE CR2E034 OTERO, VICTOR 1.2 NAME NAME 9595 NW 89TH AVE. 1.3 STREET ADDRESS STREET ADDRESS Miami, Fla. 33178 MIAM! FL 33117 1.4 Cify - ST - ZiP CHTY-ST-ZIP Change Addition DELETE ΠV TITLE 2.2 NAME CHALUJA, MARIO NAME 9595 NW 89TH AVE. 2.3 STREET ADDRESS STREET ADDRESS Miami, Fl. 33178 **MIAMI FL 33117** 2 4 CITY ST-ZIP CITY-ST-2IP Change Addition **X**. DELETE 3.1 TITLE TITLE MORENO: ANGEL 3.2 NAME NAME 0506 HW 80TH AVE. 3.3 STREET ADDRESS STREET ADDRESS MAN EL 33117 3.4 CHY-ST-ZIP CITY - ST-7IP Change Addition DELETE 4.1 DILE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4.0.1Y - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 THE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - 2IF Change Addition OFLETE EITITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this fining is voluntarily furnished and does not qualify for the exemption stateo in Section 119 07(3)(k). 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 app an officer or directly of the corporation or the receiver or trustee empowered to execute this report as required by Chanter 617, Florida Statutes, and that my name appears by flock 13 in changed, or on an attachment with an address. CITY - ST-ZIP

SIGNATURE: JIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

Victor Otero, President,

dent, 6/10/96

(305) 885-0737

Daytime Phone *