

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
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 23 1996 8:00 am
Secretary of State

DOCUMENT # P95000077574 (8)

1. Corporation Name

ACR CARGO SERVICES INC.

Principal Place of Business

1386 N.E. 176TH STREET
N. MIAMI BEACH FL 33162

Mailing Address

1386 N.E. 176TH STREET
N. MIAMI BEACH FL 33162



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

P.O. BOX 591097

27

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

MIAMI, FLORIDA

29

33159-1097

30

U.S.A.

9. Name and Address of Current Registered Agent

APONTE, CARLOS R
12401 N.E. 16TH AVENUE
APT. #423
NORTH MIAMI FL 33161

3. Date Incorporated or Qualified

10/05/1995

3a. Date of Last Report

N/A

4. FEI Number

65-0617593

Applied For

Not Applicable

5. 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

10. Name and Address of New Registered Agent

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

Carlos R. Aponte

VICE PRESIDENT

6-18-96

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☐ DELETE

NAME RAFIQ ALLY

STREET ADDRESS 1886 NE 176 TH ST

CITY-ST-ZIP N. MIAMI BEACH, FL 33162

TITLE VICE PRESIDENT-SECRETARY ☐ DELETE

NAME CARLOS R. APONTE

STREET ADDRESS 12401 NE 16TH AVE #423

CITY-ST-ZIP N. MIAMI, FL 33161

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

600001902526
-07/23/96--01135--016
***230.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated 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 am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

Carlos R. Aponte
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 14, 1996

597-8843

CR2E034 (3/96)