

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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000079236 (2)

1. Corporation Name

FREEWAY ENTERPRISES INC.

~~OT/1/98 BRASIL TRADING COMPANY~~

Principal Place of Business

9581 FONTAINEBLEAU BLVD.
#514
MIAMI FL 33172
US

Mailing Address

9581 FONTAINEBLEAU BLVD.
#514
MIAMI FL 33172
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/12/1995

4. FEI Number

65-0622771

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1411 N. PALM AVE

Suite, Apt. #, etc.

22

City & State

23 PEMBROKE PINES FL

Zip

24 33026

Country

25 BROWARD

2a. Mailing Address

26 1411 N. PALM AVE

Suite, Apt. #, etc.

27

City & State

28 PEMBROKE PINES FL

Zip

29 33026

Country

30 BROWARD

9. Name and Address of Current Registered Agent

CHAVES, LEILA R
9581 FONTAINEBLEAU BLVD., #514
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

LEILA R. MARCHELLI

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

17667 SW 32 STREET

83

84 City

MIRAMAR

FL

85 Zip Code

33029

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

Leila Regina Marchelli

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

04/13/98

12. OFFICERS AND DIRECTORS

TITLE DP
NAME CHAVES, LEILA R
STREET ADDRESS 9581 FONTAINEBLEAU BLVD., STE 514
CITY-ST-ZIP MIAMI FL 33172

TITLE DV
NAME MARCHELLI, ROGERIO
STREET ADDRESS 9581 FONTAINEBLEAU BLVD., STE 514
CITY-ST-ZIP MIAMI FL 33172

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME MARCHELLI, LEILA R.
1.3 STREET ADDRESS 17667 SW 32 STREET
1.4 CITY-ST-ZIP MIRAMAR FL 33029

2.1 TITLE DV
2.2 NAME MARCHELLI, ROGERIO
2.3 STREET ADDRESS 17667 SW 32 STREET
2.4 CITY-ST-ZIP MIRAMAR FL 33029

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

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 attachment with an address.

SIGNATURE:

Leila Regina Marchelli

04/13/98 (954) 442-9398

CR2E034 (10/97)