

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2002 8:00 am
Secretary of State

04-19-2002 90002 036 ***150.00

DOCUMENT # P95000079925

1. Entity Name
ORION INTERNATIONAL FREIGHT FORWARDERS, INC.

Principal Place of Business

1760 NW 94TH AVE
 MIAMI FL 33172
 US

Mailing Address

1760 NW 94TH AVE
 MIAMI FL 33172
 US

2. Principal Place of Business

2129 NW 86th AVE.

3. Mailing Address

2129 NW 86th AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

65-0614499

Applied For

Not Applicable

Zip

Country

33122 US

Zip

Country

33122 US

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

COBO, JUAN
 1760 NW 94TH AVE.
 MIAMI FL 33172

7. Name and Address of New Registered Agent

Name COBO, JUAN

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

2129 NW 86th AVENUE

City

MIAMI

FL

Zip Code

33122

8. 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

Juan Cobo PRESIDENT (JUAN COBO)

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

(NOTE: Registered Agent signature required when reinstating)

4/10/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME COBO, JUAN
STREET ADDRESS 4000 TURQUOISE TRAIL
CITY-ST-ZIP WESTON FL 33331

TITLE VP ☐ Delete
NAME BOCCINI, PEDRO
STREET ADDRESS 4216 CEDAR CREEK ROAD
CITY-ST-ZIP BOCA RATON FL

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Juan Cobo
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02

Date

305 5911138

Daytime Phone #

CR2FD34 (9/01)