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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000080704 (6)

FULL TRANSCARGO INC.

FILED May 20 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address			
1740 NW 98		1740 NW 96TH AVE		1	
MIAMI FL 33	3186	MIAMI FL 33186		DO NOT WRITE IN THIS SE	PACE
US		U\$		3. Date Incorporated or Qualified	AOL
				10/18/1995	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Miami	, Florida	26 1740 NW 9	96TH AVENUE	65-0615469	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		J. Commonto di Status Bosneto	Fee Required
City & Sta		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Miami Zip	, Florida	28 Miami, F		1rust Fund Contribution	Added to Fees
	Country	k	Country	8. This corporation owes or has paid the curre	nt year Intangible Yes ☐ No
24 331	72 25 U.S.A. 9. Name and Address of Curre	29 33172	30 U.S.A.	Personal Property Tax due June 30. 10. Name and Address of New Registered A	
•		Infliancing Wholir	B1 Name		g
CMAVARRIAGA, ANA LUCIA					
1740 NW 96TH AVE MIAMI FL 33172			82 Stree	t Address (P.O. Box Number is Not Acceptable)	
M	14MI FL 331/2		83		
	-				
			84 City	FL	85 Zip Code
11 Purefront	to the provisions of Soctors 507.05	02 and 607 1508 Florida C	talutes the shove name	d corporation submits this statement for the number of o	hanging its registered
office or	registered agent, or both, in the State	te of Florida, Such change y	vas authorized by the co	rporation's board of directors. I hereby accept the appoint	intmont as registered
agent. I	· 11 VIIIII	•	5, Florida Statules.	07/21/0	.0
SIGNATURE	Signature, typod or printed name of registered ag	uega.	(NOT): Bog-sternd Agord signatu	04/21/9	8
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTORS IN 12
TITLE	PVST	DELETE	1.1 TITLE	D	Change Addition
NAME	CARVAJAL, MARIA		1.2 NAME	CHAVARRIAGA, ANA	AA
STREET ADDRESS	1740 NW 96TH AVE		1.3 STREET ADDRESS	1740 NW 96TH AVE	
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - ZIP	MIAMI FL	
TITLE	D	DELETE			Change Addition
NAME	CARVAJAL, MARIA DEL CAF	RM	2.2 NAME		
STREET ADDRESS	1740 NW 96TH AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAM! FL		2. 4 CITY - ST - ZIP		
TITLE		DELETE			Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE			Change Addition
NAME	1		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	1		4.4 City-St-ZiP		
TITLE		DELETE			Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	·				
*****	•		5.4 City - St - ZiP		
TITLE	•	DELETE			Change Addition
NAME	•	DELETE			Change Addition
		DELETE	6.1 TITLE 6.2 NAME		Change Addition
NAME		DELETE	6.1 TITLE		Change Addition

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 suppliemental 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

MLJOILOG

MAE \7/8-9/18 X