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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPAÇAMENT OF STATE

Sandr MB. Motham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000013415 (0)

PRESTIGE FREIGHT FORWARDING, INC.

Principal Place of Business

Mailing Address

FILED May 09 1997 8:00am Secretary of State



r nincipal i raci	o OI Busiriuss	Mailing Address					
4355 8W 75TH AVENUE MIAMI FL 33155		4355 SW 75TH AVENUE Miami FL 33155-4428					
					3. Date Incorporated or Qualified 02/09/1996	3a. Date of	Last Report
2. Principal Pi	lace of Business	2a. Mailing Address		·	4. FEI Number	.1	Applied For
21		26			65-064133	55	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State		City & State	 -¬ ′		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	71p	Countr 30	у	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
	9. Name and Address of Currer	nt Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	gistered Agen	
	.ya, sandra p		81	Name			
	9 SW 153RD COURT STE 206 MI FL 33193		82 Stre		Address (P.O. Box Number is Not Acceptable)		
			63	3			
	E Company		B4	City		FL 85	Zip Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered age				ation's board of directors. I hereby acception is board of directors. I hereby acception is a second of the second	of the appointm	ent as registered
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	ECTORS IN 12
TITLE	PTD	DELETE	1.1 TOLE				hange Addition
NAME	AMAYA, SANDRA P		1.2 NAME				
STREET ADDRESS	7699 SW 153RD COURT		1.3 STRCE	1 AUDRESS			ļ
CITY-ST-ZIP	MIAMI FL 33193	T ourse	1.4 CITY-	ST-ZIP			F 1
TITLE	SD Amaya, Luis F	DELETE	2.1 THLE			[.]	change [_] Addition
NAME STREET ADDRESS	7699 SW 153RD COURT		2.2 NAME	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33193		2.4 CiTy				
TITLE		DELFTE	3.1 7(1LE				hange Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	1 ADDRESS			
CITY-ST-ZIP		T DELCE	3.4 CITY				,
TITLE		DELETE	4.1 TITLE	- 1		L. 0	change L_ Addition
NAME STREET ADDRESS			4 2 NAM	T ADDRESS			
CITY-ST-ZIP			4.4 CiTY-				
TITLE	144	DELETE	5.1 TITLE	21 211			hange
NAME			5.2 NAME				Ì
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY -	\$1 - 7IP			
TITLE		DELETE	6.11111.E				hange
NAME			6.2 NAME				
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP			6.4 CHY-	S1-ZIP			

14. I do hereby certify that the information supplied with this filling 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 eath; 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 93 if changed, or on appartachment with an address.

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MODILED CONTROL ANAV

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(206) 2/15-741/2