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

PROFIT CORPORATION **ANNUAL REPORT** 1998 **DOCUMENT #**1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

P96000022590 (9)

C&C CONTICARGO USA, CORP.

Principal Place of Business	Mailing Address
8327 NW 64TH ST MIAMI FL 83166	8327 NW 64TH ST
MIAMI FL 83166	MIAMI FD 33166

FILED May 08 1998 8:00am Secretary of State



8327 NW 641 MIAMI FL 831	H ST			B327 MW 64TH ST				- 1						
MANUAL LE ONT	(Ge		•	MIAMI FD 33166				1	DO NOT WRI	TE IN THIS S	PACE			
								۲	3. Date Incorporated or Qualified	j				٦
)								1	03/13/1996					Ì
2. Principal Pl	lace of Busin	108\$	 Mailing Address 					4. FEI Number			Applied For			
21 8418	NW 6	6th ST	26	8901 N.W	. 194	1t]	h. te	r.	65-0648407		\bot	Not	Applicable	е
	, Apt #, etc. Suite, Apt. #, etc.								5. Certificate of Status Desired				dditional	7
22 MIAMI, FL				27 MIAMI, FL					Fee Required					
City & State		~~~						l	6. Election Campaign Financing \$5.00 May 8e					
23	3316		28 33166						Trust Fund Contribution Added to Fees					
Zip	ļ	Country	ļ.,	Zip		untry	•	- }	8. This corporation owes or has p	_				ļ
24		25	[29]		30								No	4
		and Address of Curre	nt Hegis	stered Agent		81	Name		10. Name and Address of New F	iegistered A	gent			\dashv
	JAS, GEOF	_				"	Name							
		RIDGE WAY				82	Street Ad	ddress	(P.O. Box Number is Not Accept	able)				٦
MV	ami lakes	FL 33018				-	ļ <u>.</u>		· 					-
						в3	Ċ							- (
						84	City			<u> </u>	85	Zip C	ode	7
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11. Pursuant t office or re agent. I ar	to the provisi egistered ag m familiar wil	ions of Sections 607.050 lent, or both, in the State th, and accept the oblig	02 and 6 of Florid ations of	507.1508, Florida Stat ida: Such change was if, Section 607.0505, I	utes, the a s authorize Florida Sta	bove d by tutes	e-named co the corpo s.	orpora oration	tion submits this statement for the s board of directors. I hereby acc	purpose of ept the appo	chanç sintme	ging its int as r	registered egistered	'
SIGNATURE		or printed name of registered ago						_	nen reinstaling)	DATE				.]
12.	Signature, typeu	OFFICERS AN			13.	a võe	mit Bignature 16	SCHOREDO W	ADDITIONS/CHANGES TO OFF		DIRE	CTORS	IN 12	-1
TITLE	PD			DELETE	1.1 T	TLE					Ch		Addition	₩
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STREET ADDRESS		HARTRIDGE WAY					ADDRESS							[8
CITY-ST-ZIP		AKES FL 33018			- 8		IT-ZIP							
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NAME	ROJAS.	GEORGE			2.2 N	AME	ì					•		- }
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CITY-ST-ZIP		L 33018			1	-	ST-ZIP							ì
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NAME	GARCIA	FLME		*	3.2 N		}	TATE T	D WILLIAM		-	•	_	- }
STREET ADDRESS		HARTRIDEGE WAY							IR, WILLIAM D1 N.HARTRIDGE D	.73 W				}
CITY-ST-ZIP	*******	AKES FL 33018												
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NAME					4.2 6		Ì			'		•		1
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NAME				band Officit	6.2 N					ļ				
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STREET ADDRESS							ADDRESS							- J.,
CITY-ST-ZIP	ertify that the	e information supplied w	ith this f	fiting does not qualify	for the ex			in Sec	ction 119.07(3)(i), Florida Statutes.	I further cer	tify the	at the li	nformation	\dashv
				a cook not quant	III-O OAI									

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 trusted 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: Elvie Garcia

Blue Parcia

APRIL/20/98

305- 499-9084