## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 13, 1999 8:00 am PROFIT FLORIDA DEPARTMENT OF STATE Secretary of State CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 05-13-1999 90032 001 \*\*\*150.00 DIVISION OF CORPORATIONS 1999 DOCUMENT # P 96 0000 33131 E.M.W. FREight FORWARdING CORP. 549233 - 90032 - 1 Principal Place of Business 2300 CORAL WAY 2300 CURALWAY Ste. 200 Miani, Fl 33145 SHE. 200 DO NOT WRITE IN THIS SPACE MIANI, E133145 3. Date Incorporated or Qualifed 4. FELNumbe Applied For 2. Principal Place of Business 2a. Mailing Address 8601 NW Not Applicable 8601 NW 72 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be MIAMI Added to Fees Trust Fund Contribution Country 8. This corporation owes the current year Intangible Personal Property Tax. Countr □ No Personal Property Tax. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent REPORT SERVICES, INC 83 MIAMI, FI 84 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. 4-26-99 SIGNATURE or printed name of registered agent and title if applicable stered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Addition ☐ DELETE Change 1.1 TITLE TITLE GutiERREZ EduARdo 1.2 NAME NAME 9817 NW 45th LANE STREET ADDRESS 8600 NW 72 STREET 1,3 STREET ADDRESS MIANI, F/ 33166 14 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE TITLE 2.1 TITLE 8601 NW 72 STREET 2.2 NAME 9600 NW 72 STREET STREET ADDRESS 2.3 STREET ADDRESS MIAMI, F/ 33/66 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE RojAS, NIKAIL 3.2 NAME NAME 2604 NW 72 AVE. MIAMI, Fl 33122 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP ☐ Addition ☐ Change DELETE 4.1 TITLE TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4,4 CITY-ST-ZIP CITY-ST-ZIP Change Addition | DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Addition | ☐ DELETE TITLE

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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: 1/

22

NAME

STREET ADDRESS

4-26-99/1305 1418428.