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

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name



DOCUMENT # P9600033949

DIVISION OF CORPORATIONS

Apr 21, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State 04-21-1999 90090 004 ***150.00

INTERNA	ATIONAL CARGO BROKERS,	INC.					I FE : II I I I II I 	erin erin erier	 	
						_ 				
Principal Place of Business Mailing Address						1				
10201 NW 21 ST. 10201 NW 21 ST. MIAMI FL 33172 MIAMI FL 33172						DO NOT WRITE IN THIS SPACE				
						3 Date Inco	orporated or Qualife		OI FIOL	
					•	04/18/				
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Num			Ap:	plied For
21		26				65-066	2208		<u> </u>	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.									\$8.75 A	
22 27						5. Certificate	of Status Desired		Fee Re	quired
City & State City & State			- ·			6. Election (Campaign Financin	9 🗔	\$5.00	May Be
23 28							d Contribution	• .	Added to	o Fees
Zip Country Zip			Cou	ntry		g. This corp	oration owes the co	urrent year int		_
24	25	29 3	30				Property Tax.			□No
	9. Name and Address of Current	Registered Agent				10. Name ar	d Address of Nev	v Registered	Agent	
,,,,			ļ	81	Name	Back J	MARN	PRU		ļ
MARRERO, FRANK J				82	Street Addre	ess (P.O. Box N	umber is Not Acce	ptable),	<i>-</i>	
1402 VERACRUZ LN.					248	SE EAG	le Kun !	Kive		
FT. LAUDERDALE FL 33327				83						
				84 City WesTow			FL	85 Zip C	Code 3 2 7	
11, Pursuant	to the provisions of Sections 607.0502	s, the at	ove-	named corpo	pration submits	this statement for th	ne 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.								gistered		
								į		
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: f	Registered	Agent :	signature required	d when reinstating)		DATE		
12.	OFFICERS AND		13.		<u></u>	ADDITION	S/CHANGES TO C	OFFICERS AN		
TITLE	DP	☐ DELETE	1.1 TIT	LE	İ				☐ Change	☐ Addition
NAME	MARRERO, FRANK J			1.2 NAME						
STREET ADDRESS	REETADDRESS 1406 VERACRUZ LANE			1.3 STREET ADDRESS						
CITY-ST-ZIP	FT. LAUDERDALE FL 33327		1.4 CIT	Y-ST-	ZIP					
TITLE		☐ DELETE	2.1 TIT	LE					Change	Addition
NAME	2		2.2 NA	2.2 NAME						l
STREET ADDRESS	ss		2.3 ST	2.3 STREET ADDRESS						ĺ
CITY-ST-ZIP			2. 4 CITY-ST-ZIP							
TITLE	-			3.1 TITLE					☐ Change	Addition
NAME			3.2 NA	ME						į
STREET ADDRESS			3.3 ST	REETA	ADDRESS					1
CITY-ST-ZIP		<u></u>	3.4. CI		- ZIP					["] Addising
TITLE	•	☐ DÉLETE	4.1 T(T	LE					☐ Change	Addition
NAME			4.2 NA							
STREET ADDRESS			4.3 STI	REETA	NODRESS					
CITY-ST-ZIP			4.4 CIT		ZIP					City & diagram
TITLE		☐ DELETE	5.1 TIT						☐ Change	Addition
NAME			5.2 NA							
STREET ADDRESS			1		ADDRESS					Ì
CITY-ST-ZIP			5.4 CIT		ZIP					
TITLE		☐ DELETE	6.1 TIT						☐ Change	☐ Addition !
NAME			6.2 NA							ļ
STREET ADDRESS	}		6.3 STI	REET A	ADDRESS					}

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.

6.4 CITY-ST-ZIP

SIGNATURE: