

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

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Jun 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000041599 (7) 1. Corporation Name C & A INTERNATIONAL TRUCKING, INC.			
Principal Place of Business 7970 S.W. 26ST MIAMI, FL. 33155		Mailing Address 7970 S.W. 26 ST. MIAMI, FL. 33155	
2. Principal Place of Business 21 1547 S.W. 74 CT. Suite, Apt. #, etc.		2a. Mailing Address 26 1547 S.W. 74 CT. Suite, Apt. #, etc.	
22 City & State 23 MIAMI FL		27 City & State 28 MIAMI, FL	
24 Zip 33144 Country DADE		29 Zip 33144 Country DADE	
3. Date Incorporated or Qualified 5/14/96		3a. Date of Last Report	
4. FEI Number 65-0665537		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			
9. Name and Address of Current Registered Agent JUSTO, ALBERTO L. 7970 S.W. 26 ST MIAMI, FL. 33155		10. Name and Address of New Registered Agent 81 Name RAMOS, CARLOS 82 Street Address (P.O. Box Number is Not Acceptable) 1547 S.W. 74 CT. 83 84 City MIAMI FL 85 Zip Code 33144	
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. SIGNATURE <i>Carlos Ramos</i> 6-2-97 Signature typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reappointing)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JUSTO, ALBERTO L. 7970 S.W. 26 ST MIAMI, FL. 33155 ☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RAMOS CARLOS 7970 S.W. 26 ST MIAMI, FL. 33155 ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	PTD RAMOS, CARLOS 1547 S.W. 74 CT. MIAMI, FL. 33144 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	SV RAMOS, ROSA 1547 S.W. 74 CT. MIAMI, FL. 33144 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do 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.

SIGNATURE: *Carlos Ramos* 6/2/97

CR2E034 (9/96)