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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P96000042066

TRI-STAR FREIGHT FORWARDING CORP.

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90087 008 \*\*\*158.75



						()(( <b>  1</b> 0)() <b>  00</b> ()) <b>( 00</b> ())		B 81118 8111 1881
Principal Place		Mailing Address						
7977 MM 2151 MHAMI FL 38122	STREET	631 S.W. 897H COURT MIAMLET 35174						
US WINNEY TO SOLVE					DO NOT WRITE IN THIS SPACE			
		•	س <i>ب</i> د		e Incorporated or / 16/1996	Qualifed		
2. Principal Pl	ace of Business	2a. Mailing Address	111 0 1	4. FEI	Number		A	pplied For
21 877	4 S.W. 8 Street	26 8/14 3.0	No 854	red 65	0671802			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			tifcate of Status D	esired 💥	•	Additional tequired
City & State	mi, FL	City & State  28 Miami, F	1	l l	ction Campaign Fi st Fund Contributi			May Be to Fees
<sup>Zip</sup> 33/	74 25 Country A	<sup>Zip</sup> 33174 30	Country	Per	s corporation owe: sonal Property Ta	ix.	Yes	<b>₩</b> No
	9. Name and Address of Current	Registered Agent		10. Nai	me and Address	of New Register	ed Agent	
DOD	RIQUEZ, JOYCE		81 Name	Rodrig	quez,	Joyce	ı	1
	SW 88 CT		82 Street		Box Number is No	t Acceptable)	ant	
	E 102		83	<u> </u>	S.W.	7 317	eet	
	11 FL 33174		83	,				
			84 City	Mian		F		3174
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 677.1508, Florida Statutes, the	e above-named	corporation sub	omits this stateme	nt for the purpose	of changing it	s registered egistered
agent. I a	m familiar with and accept the obligati	on of, Section 607.0505, Florida S	Statutes.	Siddon's board	or directors. I ner	(	pomano == .	
SIGNATURE					2	1.4.99		
	Signature, typed or printed name of registered agent		ered Agent signature re			DATE OFFICERS	AND DIRECT	OBS IN 12
12.	PD OFFICERS AND		13. .1 TITLE	70	ITIONS/CHANGE		Change	
TITLE	RODRIGUEZ, JOYCE C	_	2 NAME	Padrie	quez, Jos	yce C	,	_
NAME	631 S.W. 88TH CT.		.3 STREET ADDRESS	01111	S.W. 8	street		
STREET ADDRESS	MIAMI FL 33174		.4 CITY-ST-ZIP	Mian	ni FL	3317	74	
CITY-ST-ZIP TITLE	SD SD		1 TITLE	SD,	<del></del>		Change	☐ Addition
1	BERLANGA, OSCAR	<del>-</del> -	2 NAME	Borla	nga, O	scar	_	_
NAME	631 S.W. 88TH COURT		3 STREET ADDRESS	8774	nga, 0 S.W. 8	street	•	
STREET ADDRESS	MIAMI FL 33174			Mia-	mi Fl	3317	f	\ -
CITY-ST-ZIP	MIMMITE 33174		4 CITY-ST-ZIP	7775	<u> </u>		Change	Addition
TITLE			3.2 NAME					_
NAME		· ·	3 STREET ADDRESS		•			
STREET ADDRESS		-	i.4. CITY-ST-ZIP					j
CITY-ST-ZIP TITLE			I.1 TITLE	· .			Change	☐ Addition
NAME			. 2 NAME	*				_
STREET ADDRESS.			.3 STREET ADDRESS					
			A CITY-ST-ZIP					
CITY-ST-ZIP TITLE			in TITLE	<u> </u>		-	☐ Change	☐ Addition
NAME			2 NAME					
STREET ADDRESS		5	3.3 STREET ADDRESS				, ·	
CITY-ST-ZIP		5	5.4 CITY-ST-ZIP					,
TITLE			3.1 TITLE	<b> </b>			☐ Change	Addition
NAME	,		6.2 NAME					1
STREET ADDRESS		6	3 STREET ADDRESS					İ
STREET ADDRESS								1

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 empoyed 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.

**SIGNATURE**