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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000043148 (1)

BULLET FREIGHT SYSTEM, INC.

BULLE	I FREIGHT STOTEM, INC.				
Principal Plac	ce of Business	Mailing Address			EL PAGÉA Digo l (Dir Hook
2009 NW 791	TH AVE	2009 NW 79TH AVE.			
MIAMI FL 33126 MIAMI FL 33126			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	
İ				05/21/1996	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0666610	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			8.75 Additional
22		27	· · · · · · · · · · · · · · · · · · ·	6. Obtinicate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	1	Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation owes or has paid the current	· - •
24	25 9. Name and Address of Curre	29	30	Personal Property Tax due June 30. Y	
		ant nagistarau Again	81 Name	10. Name and Address of New Registered Age	nt
	TANCOURT, PEDRO		U III		
2009 NW 79TH AVE.			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
MI/	AMI FL 33126		83		
			84 City	FL ⁸	5 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	utes, the above-named cor	poration submits this statement for the purpose of cha	anging its registered
office or i	registered agent, or both, in the Statem familiar with and accept the obli-	e of Florida. Such change was	authorized by the corpora	poration submits this statement for the purpose of cha ation's board of directors. I hereby accept the appoint	ment as registered
	and decopt the opin	gationa or, aconori cor todo, r	ionoa otatatos.		
SIGNATURE	Signature, typod or printed name of registered a	gent and title if applicable (NO	TE: Registered Agent signature requ	ured when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIF	RECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change
NAME	BETANCOURT, PEDRO		1.2 NAME		
STREET ADDRESS	2009 NW 79TH AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33126		1.4 CITY-ST-ZIP		
TALE	D	☐ DELETE	2.1 TITLE	L	Change
NAME	BETANCOURT, MAGALY		2.2 NAME		
STREET ADDRESS	2009 NW 79TH AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33126		2.4 CITY-ST-ZIP		
TITLE	D ADALBERTO M	☐ DELETE	3.1 TITLE	L	Change
NAME	VALDES, ADALBERTO M		3.2 NAME		
STREET ADDRESS	2009 NW 79TH AVE.		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33126	III necese	3.4. CITY-ST-ZIP		01-1-1
TITLE		☐ DELET e	4.1 TITLE		Change 🔲 Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP		Chongo Addition
			5.1 TITLE	السا	Change 🔲 Addition
NAME CTOSET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE			= EACITY CT 7ID		
		DELETE	5.4 CITY-ST-ZIP	i de la companya de	Change Addition
NAME		☐ DELET E	6.1 TITLE		Change Addition
NAME STREET ADDRESS		☐ DELETÉ			Change Addition

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 3 if changed, on an attachment with an address.

SIGNATURE PROPERTY A

2/2/00

Langina

FILED

Mar 13 1998 8:00am

Secretary of State