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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000044214 (0)

INTERWAY FREIGHT FORWARDER CORP.

10905 SW 146TH PL

SIGNATURE

Principal Place of Business

Mailing Address

10905 SW 146TH PL

FILED Jun 04 1998 8:00am Secretary of State



MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>05/17/1996</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0674438 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes □ No 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WALTEROS, MARIA INE'S 9880 HAMMOCKS BOULEVARD 82 Street Address (P.O. Box Number is Not Acceptable) **UNIT 101** 63 **MIAMI FL 33196** 84 City Zip Code 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 the state of Florida Statutes. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition DLLETE 1.1 TITLE TITLE MARIA INES WALTERS WALTEROS, MARIA INES 1.2 NAME NAME 10905 SW 146 PL. 10905 SW 146TH PL 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY+ST-ZIP 1.4 CITY-ST-ZIP DELETE Change 2.1 TITLE TITLE VICE President INES WALTEROS WAISMAN, JORGE 2.2 NAME NAME 10905 SW 146TH PL STREET ADDRESS 2 3 STREET ADDRESS 10905 SW 146 PL. 33/86 MIAMI FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE TREASURES CARIOS WALTEROS NAME **3.2 NAME** STREET ADDRESS 3 3 STREET ADDRESS 10905 SW 3186 3.4. CITY-ST-ZIP MIAMI CITY - ST - ZIP Change Addition DELETE TITLE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 613000 Change Addition TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this amount report or supplemental arrival 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 chapter 3 on an affact that with an address.