

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # P96000050850
Corporation Name
SPEED TRANSFER INC.

Principal Place of Business Mailing Address
51 BRICKELL KEY DRIVE
SUITE 400
MIAMI FL 33131
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501 BRICKELL KEY DRIVE
SUITE 400
MIAMI FL 33131-2624
US

Principal Place of Business 2a. Mailing Address
Suite 400 - 400 26 7951 N.W. 21st Street
City & State 27
28 Miami, Florida
Zip 29 33122 Country 30 U.S.A.

3. Date Incorporated or Qualified 06/14/1996 3a. Date of Last Report
4. FEI Number 65-0692155 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
SLOSBERGAS, NELSON
501 BRICKELL KEY DRIVE
SUITE 400
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

I, the undersigned, being a director or officer of the corporation, do hereby certify that the above-named corporation submits this statement for the purpose of changing its registered office and registered agent, and that such change has been authorized by the corporation's board of directors, and hereby accept the appointment as registered agent, and I am not a director or officer of the corporation, and I hereby accept the obligations of Section 607.0305, Florida Statutes.

SIGNATURE		DATE	
1. Registered Agent Signature Required When Changing:			
2. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
FILE	D ☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SROUR, RAUL HENRIQUE	1.2 NAME	
STREET ADDRESS	7951 N.W. 21st Street	1.3 STREET ADDRESS	
TY-ST-ZIP	Miami, Florida 33122	1.4 CITY-ST-ZIP	
FILE	D ☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	DEL MOL VAN OTTERLOO, RICHARD	2.2 NAME	
STREET ADDRESS	7951 N.W. 21st Street	2.3 STREET ADDRESS	
TY-ST-ZIP	Miami, Florida 33122	2.4 CITY-ST-ZIP	
FILE	D ☐ DELETE	3.1 TITLE	DPS ☒ Change ☐ Addition
NAME	GONCALVES, MARCIO C.	3.2 NAME	GONCALVES, MARCIO C.
STREET ADDRESS	7951 N.W. 21st Street	3.3 STREET ADDRESS	7951 N.W. 21st Street
TY-ST-ZIP	Miami, Florida 33122	3.4 CITY-ST-ZIP	Miami, Florida 33122
FILE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
TY-ST-ZIP		4.4 CITY-ST-ZIP	
FILE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
TY-ST-ZIP		5.4 CITY-ST-ZIP	
FILE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
TY-ST-ZIP		6.4 CITY-ST-ZIP	

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Deputy Secretary