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Apr 14 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 # P96000053187 (6)

1. Corporation Name

WORLD WIDE FREIGHT SERVICES OF MIAMI, INC.



Principal Place of Business

7360 NW 56TH ST.  
MIAMI FL 33166

Mailing Address

7360 NW 56TH ST.  
MIAMI FL 33166-4248

3. Date Incorporated or Qualified

06/21/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PEREZ, GUILLERMO C  
7360 NW 56TH ST.  
MIAMI FL 33166

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of individual or predecessor of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME *President*  
STREET ADDRESS *Guillermo Chapeton*  
CITY-STATE-ZIP *7360 NW 56 ST*  
*Miami, FL 33166.*

11 TITLE ☐ Change ☐ Addition  
12 NAME *President, Treasurer*  
13 STREET ADDRESS *Guillermo Chapeton*  
14 CITY-STATE-ZIP *7360 NW 56 ST*  
*Miami, FL 33166.*

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

21 TITLE ☐ Change ☒ Addition  
22 NAME *Vice Pres.*  
23 STREET ADDRESS *Eliberto Chapeton*  
24 CITY-STATE-ZIP *7360 NW 56 ST*  
*Miami FL 33166*

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

31 TITLE ☐ Change ☒ Addition  
32 NAME *Miriam Chapeton*  
33 STREET ADDRESS *SECRETARY*  
34 CITY-STATE-ZIP *7360 NW 56 ST*  
*Miami FL 33166*

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-STATE-ZIP

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 any attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)