## 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 # P96000064489 (3)

INTERNATIONAL AMERICAN COURIER SYSTEM, INC.

Principal Place of Business

Mailing Address

4123-MW 125TH AVE---

-1133 NW 125TH AVE-

US

## FILED Apr 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

(305)

								07/31/1996				
2. Principal P	lace of Busin	ness II.	2a. Mail	ing Address		<b>4</b> 1.		4. FEI Number	<u></u>		Ar	pplied For
1 647	NW	128th Pl	26 6	47 NW	/ 121	<b>5</b>	<u> 19</u>	65-06854	42		No	ot Applicable
Suite, Apt.	#, etc.		Suite 27	e, Apt #, etc.				5. Certificate of S	Status Desired			Additional equired
City & Stat	le			& State	-1			6. Election Camp	aign Financing			May Be
Miami FL			28 Miami Fl					Trust Fund Contribution Added to Fees				
Zip		Country	Zip		Cot	intry		8. This corporation	on owes or has pa		<b>-</b>	
24 35182 25 USA 29 33182 9. Name and Address of Current Registered Agent							A	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent				
<del></del>			t Registered	Agent		81	Name	10, Name and Ad	dress of New Re	gistered A	gent	
TORRES, GERMAN												
8101-6W-161-AVE- -MIAMI FL 93193-						82 Street Address (P.O. Box Number is Not Acceptable) 647 NW 128 P						
						84	City	• •		FL		Code
11. Pursuant	to the provis	ions of Sections 607.050	2 and 607.15	08, Florida Stal	lules, the a	bove	-named corp	poration submits this s	tatement for the r	ourpose of	changing it	ts registered
office or r agent. I a	regi <b>ste</b> red ag am <b>fa</b> miliar w	gent, or both, in the State ith, and accept the obligi	of Florida So ations of, Sec	uch change wa tion 607.05 <mark>05</mark> ,	s authorize Florida Sta	d by tutes	the corporat	tion's board of directo	rs. I hereby acce	pt the appo	intment as	registered
SIGNATURE	Signature, typed	or printed name of registered ago	al and title it appli	Cable (N	OTE Registere	d Agei	nt signature requir	red when reinstating)		DATE		
12.		OFFICERS AN	DIRECTOR		13.			ADDITIONS/CH	ANGES TO OFFIC	CERS AND		
TITLE	PD			L. DELETE	1.1 1	TLE					Change	Addition
NAME		, MAURICIO			1.2 N	AME			1			
STREET ADDRESS	<u> </u>	V-151-AVE-			1.3 S	TREET	address 6	47 NW	128 P			
CITY-ST-ZIP		L-03193-				ITY-SI	- ZIP	hami Pl	33182			
TITLE	VSD	05514444		DELETE	2.1 (1		}				Change	Addition
NAME		, GERMAN			2.2 N			47 NW	128th P1			
STREET ADDRESS	1 7 7	V-151-AVE-→					ADDRESS -	71	•			
CITY - ST - ZIP	-MAMI F	F-99189.		DELETE	2.40 3.1 Ti	HTY-S	1- ZIP <b>T</b>	Miami, Fl	33182		Change	Addition
TITLE	}			L) bettie	3.1 N		1				Change	L Audillon
NAME OTOFFE ADDRESS							- DDOCCO					
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP TITLE	<del>-</del>			DELETE	4 1 T)	TLF	1-218	<del></del>			Change	Addition
NAMÉ					4.2 N		- 1			,		
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP	]					ITY-ST						
TITLE	- <del>-</del>			DELETE	5.1 11						Change	Addition
NAME					5.2 Na	AME					Ť	
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					•	ITY-ST						
TITLE				DELETE	6.1 Ti						Change	Addition
NAME					6.2 N/	AME						
STREET ADDRESS					635	TREET A	ADDRESS					
CITY-ST-ZIP						ITY-ST						
14. I hereby o	certify that th	e information supplied w lal report or supplementa	th this filing of	does not qualify	for the exe	empt	ion stated in	Section 119.07(3)(i), I	Florida Statutes. I	further cer	tify that the	information
officer or	director of the	e corporation of the rece	i armuarrepo iver or trusto	e empowered t	o execute I	u ine this r	u my signatu eport as reqi	uired by Chapter 607,	e legal ellect as l Florida Statutes;	and that m	iy name ap	pears in