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**PROFIT CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600066781 (1)

FREIGHT STATION INTERNATIONAL, INC.

## **FILED** Apr 21 1997 8:00am Secretary of State



Principal Plac							
Principal Place of Business Mailing Address		Mailing Address				ODINE ODINE DILLE BILLI I	####
2220 NORTHEAST 2ND AVENUE MIAMI FL 83197		2220 NORTHEAST 2ND MIAMI FL 33137-4806	2220 NORTHEAST 2ND AVENUE MIAMI FL 33137-4806				
				3	Date Incorporated or Qualifie	d 3a. Date of	Last Report
2. Principal Place of Business		2a, Mailing Address	1		, FEI Number	····	Applied For
Suite, Apt. #, etc.			26		65-0689062		Not Applicat
City & Stat		Suite, Apt. #, etc. 27 City & State		5	Certificate of Status Desired		3.75 Additional Fee Required
]		28		6	Election Campaign Financing Trust Fund Contribution	\$	5.00 May Be Added to Fees
Zip	Country	Zip	Country	8	This corporation has liability for	or intangible tax ι	nder s. 199.032,
<u> </u>	25] g. Name and Address of Cu	29	]30]		Florida Statutes	Yes No	<u> </u>
ANA		Heliatored Agent	81	10 Vame	Name and Address of New	Hegistered Agen	1
AMERILAWYER CHARTERED				Joh	NNY M CU	Rbelo	
	ALMERIA AVENUE RAL GABLES FL 33134		<b>82</b> S	Street Address (I	P.O. Pox Number is Not Accept	table)	
UUI	TAL SADLES PL 33134		83	6812 N	w 41 Ave		
			55				
			<b>84</b> C	City	,	<b>—</b> 85	Zip Code
1. Pursuant	to the provisions of Sections 607	0502 and 607 1509 Florida State	utoo the above m	MiAm		FL   °°	33150
office or t	to the provisions of Sections 607. registered agent, of both, in the S im familiar with, and account the o	tate of Florida. Such change was	s authorized by th	e corporation's	on submits this statement for thi board of directors. I hereby acc	e purpose of char cept the appointm	iging its registere ent as registered
agent. La	im tamiliar with, alto account the o	bligations of Section 607 0505. F	Florida Statutos		•		
		7.5000000000000000000000000000000000000	Va Gialdies.				
	Lichma ( IM)	<i>40/1</i> 10 .	Res	<u>.</u>		04/14/9	7.
IGNATURE	Signature typed or princed name of registered	d agent and title if applicable (NC	DTE: Registered Agent si	ignature required whe	n reinstaling)	04/14/9	<u>7.</u>
GNATURE 2.	Signature typed or princed name of registered	<i>40/1</i> 10 .	DTE Registered Agent si	ignature required whe		O4/14/9 FICERS AND DIRE	7. ECTORS IN 12
2, TUE	Signature Speed of printed name of registered OFFICERS	d agont and title if applicable (NO AND DIRECTORS	DTE: Registered Agent si  13.  1,1 TITLE	ignature required whe	n reinstaling)	O4/14/9 FICERS AND DIRE	<u>7.</u>
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empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name