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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1	MENT# P9600(PARAGUAYAS CARGO, INC.	0080634 (4)				1000 0 000 0000 0000 600 000
Principal Place of Business		Mailing Address	Mailing Address			HERM BOKIN DEFEN HILL DIDI HODI
2205 NW 70TH AVE. MIAMI FL		2205 NW 70TH AVE. MIAMI FL			DO NOT WRITE IN TH	IIS SPACE
					3. Date Incorporated or Qualified	
2 Principal P	lace of Business	2a. Mailing Address			09/27/1996 4. FEI Number	Applied For
21	iace of Dusinoss	26			65-0703405	Not Applicable
		Suite, Apt. #, etc.				\$8.75 Additional
22		27	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Country 30	,	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
	Sa do , lilo		81	Name		
7630 \$ W 91ST AVE.			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
MIA	MI FL 33173		83			
			84	City	F	85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statu of Florida Such change was ations of Section 607.0505, Fl	les, the above authorized by orida Statute	e-named cor the corpora	rporation submits this statement for the purposation's board of directors. I hereby accept the	
SIGNATURE	, ,	•				
	Signature, typed or printed name of registered age		F: Registered Age	n) signature requ	Jired when reinstating) DAT	
12.	D OFFICERS AN	OFFICERS AND DIRECTORS DELETE		<u> </u>	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	VIVEROS, IGNACIO	☐ DELETE 11				Onlings realition
STREET ADDRESS	2205 NW 70TH AVE.		1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY - S	Ł		
TITLE	CASADO, LILO		2.1 TITLE			Change Addition
NAME			2.2 NAME			1
STREET ADDRESS	7630 SW 91ST AVENUE		2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	MIAMI FL 33173	N FL 331/3 □ DELETE		ST-ZIP		☐ Change ☐ Addition
NAME		☐ DELETE 3.1°		1		Change Addition
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY - 3			i
TITLE		DELETE				Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4 3 STREET	ADDRESS		
CITY-ST-ZIP				T-ZIP		
TITLE		DELETE 5.1				☐ Change ☐ Addition
NAME STREET ADDRESS			5.2 NAME	1000000		
STREET ADDRESS CITY-ST-ZIP			5.3 STREET			
TITLE	DE SWE		6.1 TITLE	H - LIF		☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CTV . \$1.7(P			SACITY.S			í

14. I 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:

FILED

Apr 24 1998 8:00am

Secretary of State