## 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 # P9600087216

I.G.M. CARGO, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

PO BOX 655156 MIAMI, FL 33265-5156

FILED Apr 07 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE

305-485-0177

3. Date Incorporated or Qualified

2. Principal Place of Business 2a, Mailing Address					4. FFI Number	Applied For
21 11230 SW 43 Ter. 26		<del>   </del>			65-0713608	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
		27			Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23 Miami, FL 28  Zip Country Zip C			Country	,	Trust Fund Contribution	Added to Fees
24 33165 25 Miami Dade 29 30			<del>-</del> , '	,	This corporation owes or has paid     Personal Property Tax due June 3	<b></b>
9. Name and Address of Current Registered Agent					10. Name and Address of New Reg	
81					TV. Hame and Aburess of New Neg	natered Agent
American Prodess Agents						
Bridge City, TX 77611				82 Street Address (P.O. Box Number is Not Acceptable) 83		
				<b>84</b> City <b>FL 85</b> Zip Code		
11. Pursuant to the previsions 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 agont, 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						
office or registered agost. or both, in the State of Florida Statutus, the anovertaried corporation's board of directors. I hereby accept the appointment as registered agost. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature—Fig.1 or posted name of registered agent, and the of applicable (NOTE: Registered Agent agreture required when reinstating) DATE.						
12.	Signature system or produced name of registered agent a OFFICERS AND I		Registered Age	ent signature require	ADDITIONS/CHANGES TO OFFICE	DATE.
TITLE	· <del>/</del>	DELETE	11 1/11		Vise-President	Change Addition
NAME	President		1.2 NAME			Es change Es Auction
STREET ADDRESS	Jorge Douglas 11230 SW 43 Ter.		1.3 STREET	ADDRESS	Ivette Douglas	
CITY-\$1-7IP			14 CITY- 9		11230 SW 43 Ter.	ı
TITLE	Miami, FL 33165	DELETE	2 1 TI*LE	)1-51k	Miami, FL 33165	☐ Change ☐ Addition
NAME	Vice-President	<del>_</del>	2 ? NAME			Change Monto
STREET ADDRESS	Jose M. Carrazan	.a	2 3 STHEET	ADODECC		
CITY+\$1-ZIP	6345 SW 138 Crt.		2.4 GITY - 3			
TITLE	Miami, FL 33183	DCLETE	3.1 TIPLE	21-711		Change
NAME			3.2 NAME			mana
STREET ADDRESS			3 3 STREET	Afringres		
CITY-\$1-ZIP			3 4 CITY-S	- 1		į
TITLE		DELETE	4.1 TITLE	2 ***		☐ Change ☐ Addition
NAME			4. 2 NAME	1		,
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-\$T-ZIP			4.4 CITY - S	1		/
TITLE		☐ DELETE	5.1 TITLE			Change
NAME			5.2 NAME			
STREET ADDRESS			5 3 STRIET	ADDRESS		$I \cap (U/\mathbb{S})$
CITY+\$1-ZIP			5.4 GHY+S		,	ペリルナー
TITLE		☐ DELETE	6.1011		30000248	- Addition Addition
NAME			62 NAME		######################################	515tas
STREET ADDRESS			63 STREET	ADDRESS	-04/07/98010	JJTTUUb
CITY-ST-ZIP			6 4 CITY-S	1 - ZIP	***150.00	
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						

Jorge Douglas