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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE



**FILED** 

Feb 05 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** P96000092745 (4)

D A C	ADOC TRANSPORT INC	` ,	•			}				
H-A CA	ARGO TRANSPORT INC.					1 1 1 1 1 1	501 118 (5110 3)111 40111 90111 90111 881	::	INC NEED CONT	
l										
Principal Pla	ce of Business	Mailing Address	, .			]    <b>    </b>		30 IUI30 ISUU 3001 U		
847 NW 119										
SUITE 205 SUITE 205							DO NOT WRITE IN	THIS SPACE		
MIAMI FL 33168 MIAMI FL 33168							3. Date Incorporated or Qualified			
						1	2/1996			
2. Principal	Place of Business	2a. Mailing Address				4. FEI Nu		-     A	pplied For	
21	21 26						0706524	<del></del>	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							ate of Status Desired	\$8.75	Additional	
22 27 27							ale of Status Desired	Fee R	equired	
City & State City & State							n Campaign Financing	\$5.00	May Be	
23		28	,			Trust F	und Contribution	Added	to Fees	
Zip	Country	Zip	Coun	try		1	prporation owes or has paid th			
24	25	29	30				al Property Tax due June 30.		No	
	g. Name and Address of Curre	nt Registered Agent		31 Na	me	10. Name	and Address of New Regist	erea Agent		
	RYANT, BERNARD H		,	"  140	me					
1	7 NW 119 ST		[8	32 Str	eet Addre	ss (P.O. Bo)	Number is Not Acceptable)			
SUITE 205			-	33			<del></del>			
Mi	AMI FL 33168			~						
			[8	34 Cit	у			FL 85 Zip	Code	
44 Priroupe	t to the provisions of Castiana 607.05	02 and 607 1509 Florida State	ton the shi	210 505	nad carne	ration aubm	its this statement for the surp		to registered	
office or	t to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the oblic	e of Florida. Such change was	authorized	by the	corporation	on's board of	directors. I hereby accept the	e appointment as	registered	
ļ		gations of, Section 607.0505, I	-lorida Ştatu	tes.						
SIGNATURE	Skyrature, typed or printed name of registered as	pent and title if applicable. (NC	DTE, Registered	Agent sign	nature require	d when reinstating	a)	ATE		
12.		ND DIRECTORS	13.				NS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE	PD	DELETE	1.1 TITL	1.1 TITLE				Change	Addition	
NAME	PEREIRA, ANDERSON H		1.2 NAM	IĘ.	PER	EZRA	WANDERSON H			
STREET ADDRESS	847 NW 119 ST. #205		1.3 STR	EET ADDRI						
CITY-ST-ZIP	MIAMI FL 33168		1.4 CITY - ST - ZIP							
TITLE	VD	VD DELETE		2 1 TITLE				Change	Addition	
NAME	amora, sergio q		2.2 NAM	2.2 NAME						
STREET ADDRESS	a real a to a final and a second		2.3 STR	2 3 STREET ADDRESS				-		
CITY-ST-ZIP	MIAMI FL 33168		2. 4 CIT	Y-ST-ZIP						
TITLE	SD	L DELETE	3,1 TITL	E			-	☐ Change	Addition	
NAME	ROCHA, PAULO A JR		3.2 NAM	Œ						
STREET ADDRESS	/		3,3 STR	EET ADDRI	ess					
CITY-ST-ZIP	MIAMI FL 33168		3,4. CIT	r - ST - ZiP			<u> </u>			
TITLE		DELETE	4,1 TITL	E				☐ Change	Addition	
NAME			4. 2 NAX	AE	1					
STREET ADDRESS			4.3 STR	EET ADDRI	ESS					
CITY-ST-ZIP				4.4 CITY-ST-ZIP						
TITLE		DELETE	5.1 TITL	E				L Change	Addition	
NAME			5.2 NAM							
STREET ADDRESS			1		1					
			1	ET ADDRI	ss					
CITY-ST-ZIP			5.3 STRI 5.4 CITY	ET ADDRI '-ST-ZIP	ss					
CITY-ST-ZIP TITLE		☐ DELETE	5.3 STRI	ET ADDRI '-ST-ZIP	ss			☐ Change	Addition	
		DELETE	5.3 STRI 5.4 CITY	EET ADDRI '-ST-ZIP E	:SS			☐ Change	Addition	
TITLE		DELETE	5.3 STRI 5.4 CITY 6.1 TITU 6.2 NAM	EET ADDRI '-ST-ZIP E				Change	Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 n produced with an address. (305) 888 5008