

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000095041

1. Entity Name

ANI CARGO SERVICES, INC.

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90109 010 ***150.00

Principal Place of Business

Mailing Address

6931 NW 87TH AVE
MIAMI FL 33178

6931 NW 87TH AVE
MIAMI FL 33178

2. Principal Place of Business

6931 NW 87TH AVENUE

Suite, Apt. #, etc.

3. Mailing Address

6931 NW 87TH AVENUE

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

65-0714754

Applied For

Not Applicable

Zip

33178

Country

U.S.A.

Zip

33178

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PITTER, CARL S
7380 W ATLANTIC BLVD
MARGATE FL 33063

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME CHANG, STEPHEN
STREET ADDRESS 1912 SW 162ND AVE
CITY-ST-ZIP MIRAMAR FL 33027

TITLE TD ☐ Delete
NAME MCBEAN, FELICIA
STREET ADDRESS 1912 SW 162ND AVE
CITY-ST-ZIP MIRAMAR FL 33027

TITLE VP ☐ Delete
NAME GRANT, ALLAN E
STREET ADDRESS 2050 N E 140 STREET APT 17
CITY-ST-ZIP NORTH MIAMI BEACH FL 33181

TITLE S ☐ Delete
NAME REDWOOD, VALYA
STREET ADDRESS 1912 SW 162ND AVE
CITY-ST-ZIP MIRAMAR FL 33027

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME 1836 SW 150TH AVENUE
STREET ADDRESS MIRAMAR, FLORIDA 33027
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)