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Jun 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000098061 (0)

1. Corporation Name

AMEKS INTERNATIONAL FREIGHT FORWARDERS CORPORATIO
N

W/C
3-2-98

Principal Place of Business

8341 NW 54 ST.
HOLLYWOOD FL 33166

Mailing Address

8341 NW 54 ST.
HOLLYWOOD FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/04/1996

4. FEI Number

65-0711426

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 834 NW 54 ST

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FL

Zip

24 33166

Country

25 DADE

2a. Mailing Address

26 8341 NW 54 ST

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FL

Zip

29 33166

Country

30 DADE

9. Name and Address of Current Registered Agent

DA COSTA, ARTUR M
3300-191 ST., APT. 417 AVENTURA
MIAMI FL 33180

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions 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 agent, 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PTD
DA COSTA, ARTUR M
STREET ADDRESS 3300-191 ST. APT. 417 AVENTURA
CITY-ST-ZIP MIAMI FL 33180

TITLE ☐ DELETE

NAME VSD
DE MENEZES, FRANCISCO F
STREET ADDRESS AVE PROFESOR JOA MACHADO, #2811
CITY-ST-ZIP NATAL RN, BRAZIL 59078340

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

300002553223
-06/09/98-01077-037
***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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

05-27-98

CR2E034 (10/97)