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 # P97000001990 (5)

CONTRACT LOGISTICS, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
995 SW 84 /			995 SW 84 AVE #321 MIAMI FL 33144			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 01/02/1997		
2. Principal P	Place of Business	2a, Maiting Ac	2a. Mailing Address			······································	plied For	
21		26	26				t Applicable	
Suite, Apt.	#, etc.	Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 /		
22		27				Fee Re	<u> </u>	
City & Stat	0	} 1	City & State			6. Election Campaign Financing \$5.00 Trust Fund Contribution ☐ Added t		
Zip	Country		Zip Country			Trust Fund Contribution Added t 8. This corporation owes or has paid the current year Intelligence of the current year.		
24	25	29	30			Personal Property Tax due June 30. Yes No		
	Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
	L DES PINO, LUIS			81	Name		İ	
	5 SW 84 AVE #321				Street	reet Address (P.O. Box Number is Not Acceptable)		
Mi	AMI FL 33144		}					
				84	Chi	los 75 d	2-1-	
				04	City	FL 85 Zip C	2006	
office or r	to the provisions of Sections 607 egistered agent, or both, in the sim familiar with, and accept the c	State of Horida. Such ch	ange was authoriz	ed by	the corp	d corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as	s registered registered	
SIGNATURE								
Signature, typed or pouled name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS				F Registered Agent signature requi		e required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 12	
TITLE	D DELETE					POSSIDENT Change	Addition	
NAME	VALDESPINO, LUIS		12 N					
STREET ADDRESS	995 SW 84 AVE #321		1.3 S ⁷		ADDRESS			
CITY-ST-ZIP	MIAMI FL 33144		1.4 CI		T-ZIP			
TITLE				TITLE		VICE PRESIDENT Change	Addition	
NAME			2.2 N			MARIO REVILLA 5406 SW 134 PLACE		
STREET ADDRESS					ADDRESS	MIAMI PL 33175		
CITY-\$T-ZIP TITLE			CITY-S	51 - ZIP	Change	Addition		
NAME			3.2 NAME					
STREET ADDRESS			3.3	STREET	ADDRESS			
CITY-\$T-ZIP	3.4		CITY-5	37- 7 ∤Ρ				
TITLE	DELETE 4.11		TITLE		☐ Change	Addition		
NAME			4. 2	NAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE	4.4 CI DELETE 5.1 TI		CITY-S	1 - ZIP	Change	Addition		
NAME		U		NAME		L.J Change	LJ AOURIUN	
STREET ADDRESS					address .	†		
CITY-ST-ZIP				CITY-S				
TITLE				TITLE		☐ Change	Addition	
NAME			62	NAME				
STREET ADDRESS			63	STREET	address		İ	
CITY-ST-ZIP				CITY-S		1.00.0000000000000000000000000000000000	12/2-22	
14, Inereby (ceruiy that the information suppli	ua with this filing does n	ot quality for the e	xemb'	ion state	ed in Section 119.07(3)(i). Florida Statutes, I further certify that the	iniormation I	

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.