

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 DEC 21 AM 11:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

*P97000017538*  
VISBEEN FORWARDING & LOGISTICS  
FLORIDA, INC.

Principal Place of Business

Mailing Address

1316 N.W. 78TH AVENUE  
MIAMI, FL 33126

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2/97

2. Principal Place of Business

21 SAME AS ABOVE

Suite, Apt. #, etc.

22 SAME AS ABOVE

City & State

23 MIAMI FLORIDA

Zip

33126

Country

2a. Mailing Address

26 SAME AS ABOVE

Suite, Apt. #, etc.

27 SAME AS ABOVE

City & State

28

Zip

Country

29

30

4. FEI Number

65-0729886

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 the current year  
Intangible Personal Property.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

NANCY M. BADIAN  
7220 N.W. 36th STREET  
STE 215  
MIAMI, FL 33166

10. Name and Address of New Registered Agent

81 Name

WILLIAM G RAULD

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

3920 INVERRARY BLVD C-103

83

84 City

LAUDERHILL

FL

85

Zip Code

33319

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

*William G Rauld*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12/13/99

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☐ DELETE  
NAME WILHELMUS M. VISBEEN  
STREET ADDRESS 1316 N.W. 78TH AVENUE  
CITY-ST-ZIP MIAMI FL 33166

TITLE ☐ DELETE  
NAME WILLIAM G. RAULD  
STREET ADDRESS 3920 INVERRARY BLVD C-103  
CITY-ST-ZIP LAUDERHILL FL 33319

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 500003082515--7  
1.4 CITY-ST-ZIP -12/29/99-01012--006  
\*\*\*\*150.00 \*\*\*\*150.00

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

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:

*William G Rauld*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/1/99 305432464  
Date Daytime Phone #

KE