## **FILED**

Apr 30, 2002 8:00 am & Secretary of State

04-30-2002 90144 033 \*\*\*150.00

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000033289 1. Entity Name

**FUTURE CARGO CORPORATION** 

Principal Place of Business 8417 NW 74TH ST

SIGNATURE

(See criteria on back)

Mailing Address

8417 NW 74TH ST

|   | SUITE 4E<br>Miami Fl 33166                     |   | I TERIKERA NIK KRIKI KERU BENIK BENIK BENIK BENIK BENIK BUNAK KINA KARAL KRIKA.   |   |  |
|---|--|---|---|---|--|
| 2. Principal Place of Business                  |  | S   |   |   |  |
| Suite, Apt. #, etc.                             |  | 3.  | DO NOT WRITE IN THIS SPACE  |   |  |
| <del></del>                                     | City & State                                   |   | 4. FEI Number 65-0747449  | Applied F   |  |
| Country   | Zip  | Country   |   | Not Appli<br>5 Additional<br>equired  |  |
| 6. Name and Address of Current Registered Agent |  |   | 7. Name and Address of New Registered Agent   |   |  |
| ALDO J<br>STREET<br>26                          |  |   | ress (P.O. Box Number is Not Acceptable)  | o Code  |  |
|   | Country  Name and Address of C  ALDO J  STREET | MIAMI FL 33166  of Business  3. Mailing Address  City & State  Country  Zip  Name and Address of Current Registered Agent  ALDO J  STREET | MIAMI FL 33166  of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Name and Address of Current Registered Agent  Name  Name  Street Add | MIAMI FL 33166  of Business  3. Mailing Address  City & State  City & State  Country  Country  Zip  Country  5. Certificate of Status Desired  RADO J  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable) |  |

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

| This corporation is eligible to satisfy its Intangible | e |
|--|---|
| Tax filling requirement and elects to do so            |   |

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State

(NOTE: Registered Agent signature required when reinstating)

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Applied For Not Applicable

| •11. OFFICERS AND DIRECTORS                    |   | 12.      | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |                     |
|--|---|----------|---|---------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          | P<br>GENIVALDO, MELO J<br>8417 NW 74TH ST<br>MIAMI FL 33166 | ☐ Delete | THILE  NAME  STREET ADDRESS  CITY-ST-ZIP          | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP             | ☐ Change ☐ Addition |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP             | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-7IP             | ☐ Change ☐ Addition |

13. I hereby certify that the information supplied with this filling 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: