FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Addroce

PROFIT CORPORATION ANNUAL REPORT 1998

Principal Place of Rucinoss



Sandra B. Mortham,

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000045424 (3)

M.J.F. CARGO CORPORATION

FILED Mar 12 1998 8:00am Secretary of State



| r mopar race | o or oddinoss | Willing Address | Willing Participas | | | |
|---|---|--------------------------------------|---|-----------------|----------------|--|
| 15969 NW 64TH AVE. #112 MIAMI FL 33014 | | 15969 NW 64TH AVE. MIAMI FL 33014 | 15969 NW 64TH AVE. #112 MIAMI FL 33014 | | | DO NOT WRITE IN THIS SPACE |
| | | | | | | 3. Date Incorporated or Qualified |
| | | | | | | 1 |
| - 63 | | | | | | 05/20/1997 |
| | lace of Business | 2a. Mailing Address | | | | 4. FEI Number Applied For 65-0755901 Not Applied by |
| 21 | | [26] | | | | |
| Suite, Apt. | #, otc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired S8.75 Additional Fee Required |
| City & State | 0 | City & State | | | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | | 28 | | | | Trust Fund Contribution Added to Fees |
| Ζιρ | Country | Zφ | Cou | intry | | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 | 29 | 30 | | | Personal Property Tax due June 30. Yes No |
| | 9. Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New Registered Agent |
| M | GUEL, JAIME SAN | | • | 81 | Name | |
| | • | | | | | |
| | 969 NW 64TH AVE. #112 | | | 82 Street Addre | | ddress (P.O. Box Number is Not Acceptable) |
| MI/ | AMI FL 33014 | | | 83 | | |
| •. | | | | | | |
| ` | | | | 84 | City | 85 Zip Code |
| | | | | | - | FL V |
| 11. Pursuant t | to the provisions of Sections 607 050 | 2 and 607, 1508, Florida Sta | lutos, the at | bove | -named c | corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered |
| agent. La | ngistered agent, or poin, in the State of familiar with, and accept the obliga | ations of, Section 607.0505, | Florida Stat | tutes | the corpo | oration's board or directors, i hereby accept the appointment as registered |
| SIGNATURE | Signature, typed or product come of registered age | | | | | required when reinstating) DATE |
| 12. | OF LICERS AN | ···· | 13. | u region | " BIGHTOILE II | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PRESIDENT | DELETE | 1.1 TC | TIF | | Change Addition |
| | | otten | 1,2 NA | | | |
| NAME | JAIME SAN MIGUEL | 0110 | | | | |
| STREET ADDRESS | 15969 N.W. 64th Av | ve. #112 | | | ADDRESS | |
| CITY - ST - ZIP | MIAMI, FL. 33014 | | | TY-ST | - ZIP | THAT I THE STATE OF THE STATE O |
| TITLE | | ☐ DELETE | 2.1 TO | | | Change Addition |
| NAME | | | 2.2 NA | AME | | |
| STREET ADDRESS | | | 2.3 S1 | IREET / | ADDRESS | |
| CITY-ST-ZIP | | | 2. 4 C | ITY-S | T- 21P | |
| TITLE | | ☐ DETEAE | 3.1 11 | TLE | | Change Addition |
| NAME | | | 3.2 NA | AME | | |
| STREET ADDRESS | | | 3.3 \$1 | rreet <i>i</i> | ADDRESS | |
| CITY-ST-ZIP | | | 3.4. C | ITY-S | T-ZIP | |
| TITLE | | ☐ DELETE | 4.1 10 | | | ☐ Change ☐ Addition |
| NAME | | | 4. 2 N | AME | | |
| STREET ADDRESS | | | | | ADDRESS | |
| | | | | TY-ST | | |
| CITY-ST-ZIP TITLE | | DELETE | 5.1 TI | | - 217 | Change Addition |
| | | בן אנונונ | | | | CT Outside CT vention |
| NAME | | | 5.2 NA | | | |
| STREET ADDRESS | | | | | ADDRESS | |
| CITY-ST-ZIP | | | | TY-ST | - ZIP | |
| TITLE | | ☐ DELETE | 6.1 Ti | TLE | | Change Addition |
| NAME | | | 6.2 NA | AME | | |
| STREET ADDRESS | | | 6.3 ST | REET | ADDRESS | |
| CITY-ST-ZIP | | | 6.4 CI | TY-SI | -ZIP | , |

14. Thereby 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 change 11, or on an attraction with an address.

SIGNATURE:

Jame San ofin

02/02/98 (205)819-4618

CR2E034 (10/97