## 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 # P97000047767 (3)

AIR CARGO GROUP, INC.

## FILED Apr 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 550 BILTMORE WAY. PENTHOUSE ONE CORAL GABLES FL 33134 550 BILTMORE WAY, PENTHOUSE ONE **CORAL GABLES FL 33134** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/27/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For P.O. Box 526663 21 6560 NW 18 Street Not Applicable 65-07<del>8</del>3893 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Bldg. 2145 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Miami, FL Hiami, FL Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Zıp 24 33122 25 USA Yes 33152 30 USA Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Jarvis, James W 550 BILTMORE WAY, PENTHOUSE ONE 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 84 City 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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 12. 13. President/Director DELETE TITLE 11 TITLE Michael Coulson 1.2 NAME NAME 6560 NW 18 Street 1.3 STREET ADDRESS STREET ADDRESS Bldg. 2145 Miami, FL Vice Prasident/Director Change
Jorge Pitts 1 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE NAME 2.2 NAME Jorge Pittaluga 6560 NW 18 Street, Bldg. 2145 STREET ADDRESS 2.3 STREET ADDRESS Miami, ₹L 33122 Vice President/Director Change \* Addition CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE NAME 3.2 NAME Michael Mendez STREET ADDRESS 3.3 STREET ADDRESS 6560 NW 18 Street, Bldg. 2145 3.4. CITY-ST-ZIP CITY-ST-ZIP 33122 ☐ Change ☐ Addition DELETÉ TITLE 41 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP Addition DELETE Change 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-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 changed, or on appetity-chiment with an address.

SIGNATURE:

Muchael Carloon

04/20/98

115A-189-808