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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000048736 (7)

FAMA EXPORT & CARGO SERVICE, INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				I (ONFIDUE IIU (UIII) FUUR UNIII BUIII ee iii u	illi ululi farki furtan ilioa ulili ludi		
7845 N.W. 66TH STREET 7845 N.W. 66TH STREET MIAMI FL 33166 MIAMI FL 33166					DO NOT WRITE IN	THIS SPACE	
					 Date incorporated or Qualified 06/03/1997 		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21 Suite Ant	21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.				65-0758572	Not Applicable	
22	22 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	City & State City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip			Country	y	6. This corporation owes or has paid the current year Intangible		
24	4 25 29 30 30 9. Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
				Name	10. Name and Address of New Registr	red Agent	
7645 N.W. 66TH STREET MAMI FL 33166			82 Street Add		(D.O. Do. Northerlands)		
					ress (P.O. Box Number is Not Acceptable)		
			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 region.							
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, typed or printed name of registered agent and title if applicable (NOTE 12. OFFICERS AND DIRECTORS			Registered Ag	ent signature requi		ATE	
TITLE	D	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change Addition	
NAME	DECEODA MANHEL		1.2 NAME	ļ			
STREET ADDRESS			1.3 STREET	ADDRESS			
CITY-ST-ZIP	0.575		1.4 CITY - 8	ST - ZIP			
TITLE		☐ DELETE 211				Change Addition	
NAME Street address			2.2 NAME				
CITY-ST-ZIP			2.3 STREET 2. 4 CITY -:				
TITLE			3.1 TITLE	51 E.		☐ Change ☐ Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET				
CITY-ST-ZIP TITLE			3.4. CITY - :	ST-ZIP		Change Addition	
NAME			4.2 NAME			Cuange Ci Audition	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			44 CITY-S	6T-ZIP			
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition	
NAME			5.2 NAME			ļ	
STREET ADDRESS City-St-Zip			5.3 STREET				
TITLE		DELETE	5.4 CITY - S 6.1 TITLE	1-2P		Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-S	T-ZIP			

I nereby 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.