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FILED

May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000050466 (6)

1. Corporation Name
COASTAL FORWARDERS, INC.



Principal Place of Business

Mailing Address

241 SEVILLA AVENUE
SUITE 802
CORAL GABLES FL

241 SEVILLA AVENUE
SUITE 802
CORAL GABLES FL

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 8590 NW 72 ST

Suite, Apt. #, etc.

22 City & State
Miami FL

23 Zip
33166

Country
Dade

2a. Mailing Address

26 8590 NW 72 ST

Suite, Apt. #, etc.

27 City & State
Miami FL

28 Zip
33166

Country
Dade

3. Date Incorporated or Qualified

06/09/1997

4. FEI Number

65-0759343

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name
Mario Rios
82 Street Address (P.O. Box Number is Not Acceptable)
8590 NW 72 ST
83
84 City
Miami FL 85 Zip Code
33166

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 type 1 or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/29/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PD
STREET ADDRESS RIOS, MARIO E
CITY-ST-ZIP 241 SEVILLA AVENUE
CORAL GABLES FL

TITLE ☐ DELETE
NAME SD
STREET ADDRESS MELENDEZ, HUGO
CITY-ST-ZIP 241 SEVILLA AVENUE
CORAL GABLES FL

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 Rios, Mario
1.3 STREET ADDRESS 8590 NW 72 ST
1.4 CITY-ST-ZIP Miami, FL 33166

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME Melendez, Hugo
2.3 STREET ADDRESS 8590 NW 72 ST
2.4 CITY-ST-ZIP Miami FL 33166

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; that the recorder 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.

CR2E034 (10/97)