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

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**FILED** 

Apr 17 1998 8:00am

Secretary of State

DOCUMENT # P97000088951 (3)

FRONTIER INTERNATIONAL FORWARDERS, INC.

|  |  |                                    |                  |         | -\   |  |
|--|--|------------------------------------|------------------|---------|--|--|
| Principal Place of Business Mailing Address  |  |                                    |                  |         |  |  |
| 6073 N.W. 167TH STREET 6073 N.W. 167TH STREET  |  |                                    |                  |         |  |  |
| SUITE C-10   | w.c  | SUITE C-10                         |                  |         |  | DO NOT WRITE IN THIS SPACE   |
| MIAMI FL 33015   |  | MIAMI FL 33015                     |                  |         |  | 3. Date Incorporated or Qualified  |
| ļ  |  |                                    |                  |         |  | 10/15/1997   |
| 2. Principal F   | Place of Business                                  | 2a. Mailing Address                |                  |         |  | 4. FEI Number Applied For  |
| 21   | Table of Dadinous                                  | 26                                 |                  |         |  | 65-0789424 Not Applicable  |
| Súlte, Apt.  | # etc  | Suite, Apt. #, etc.                |                  |         |  | 5 South and Status Pool and Sa.75 Additional   |
| 22   | , •  | 27                                 |                  |         |  | 5. Certificate of Status Desired Fee Required  |
| City & State   |  | City & State                       |                  |         | 6. Election Campaign Financing \$5.00 May Be                     |  |
| 23   |  | 28                                 |                  |         | Trust Fund Contribution Added to Fees                            |  |
| Zip Country  |  | Zip Country                        |                  |         | 8. This corporation owes or has paid the current year Intengible |  |
| 24   | 25 29 30   |                                    | 30               | ָן<br>ו |  | Personal Property Tax due June 30. Yes No  |
|  | 9, Name and Address of Curren                      |                                    | 7                | _       |  | 10. Name and Address of New Registered Agent   |
| DEL VALLE, LEYLANI   |  |                                    | 81               | 1       | Name   |  |
|  | 73 N.W. 167TH STREET                               |                                    | -                | ļ.,     | <u> </u>   | (5.0.6)  |
|  | JITE C-10  |                                    | 82 SI            |         | Street Addre   | ess (P.O. Box Number is Not Acceptable)  |
|  | AMI FL 33015                                       |                                    | 83               | t       |  |  |
| ""   | WHIII V E 00010                                    |                                    | _                | L       |  |  |
| Ì  |  |                                    | 84               | ١       | City   | FL 85 Zip Code   |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-name |  |                                    |                  |         | named corn(  |  |
| office or  | registered agent, or both, in the State            | of Florida, Such change was a      | uthorized by     | y th    | ne corporation   | on's board of directors. I hereby accept the appointment as registered   |
| · ·  | ım ı <b>a</b> mıllar with, and accept the oblig    | ations of, Section 607.0505, Fig   | rioa Statutes    | S.      |  |  |
| SIGNATURE  | Signature, typed or printed name of registered age | rot and title if applicable (NO) ( | Registered Age   | ont :   | Signature (equire  | ct when (einstating) DATE  |
| 12.  |  | D DIRECTORS                        | 13,              |         | Tigristano rodano  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |
| TITLE  | D  | DELETE                             | 1.1 TITLE        |         |  | Change Addition  |
| NAME   | DEL VALLE, LEYLANI                                 |                                    | 1.2 NAME         |         |  |  |
| STREET ADDRESS   | 7915 NW 162ND STREET                               |                                    | 1.3 STREET       | AD      | IDRESS   |  |
| CITY-ST-ZIP MIAMI FL 33016   |  |                                    | 1.4 CITY-ST-ZIP  |         | 71P  |  |
| TITLE  |  | DELETE                             | 2.1 TITLE        |         |  | Change Addition  |
| NAME   |  |                                    | 2.2 NAME         |         |  |  |
| STREET ADDRESS   |  |                                    | 2.3 STREET       | ΙAD     | DORESS   |  |
| CITY-ST-ZIP  |  |                                    | 2.4 CITY-ST-ZIP  |         | ſ  |  |
| TITLE  |  | DELETE                             | 3.1 TITLE        |         |  | Change Addition  |
| NAME   |  |                                    | 3.2 NAME         |         |  |  |
| STREET ADDRESS   |  |                                    | 3.3 STREET       | AD      | DRESS  |  |
| CITY-ST-ZIP  | · ·  |                                    | 3 4. CITY-ST-ZIP |         |  |  |
| TITLE  |  |                                    | 4.1 TITLE        |         |  | Change Addition  |
| NAME   |  |                                    | 4. 2 NAME        |         |  |  |
| STREET ADDRESS   |  |                                    | 4.3 STREET       | AD      | DRESS  |  |
| CITY-ST-ZIP  |  |                                    | 4.4 CITY - S     |         |  |  |
| TITLE  |  |                                    | 5.1 TITLE        |         |  | Change Addition  |
| NAME   |  |                                    | 5.2 NAME         |         |  | • —  |
| STREET ADDRESS   | •  |                                    | 5.3 STREET       | ΑŪ      | DRESS  |  |
| CITY-ST-ZIP  |  |                                    | 5.4 CITY - S     |         | 1  |  |
| TITLE  |  | DELETE                             | 6.1 TITLE        | ., ,    |  | Change Addition  |
| NAME   |  |                                    | 6.2 NAME         |         |  | the straight the s |
| STREET ADDRESS   |  |                                    | 6.3 STREET       | Δħ      | ORESS  |  |
| STREET PROVIEGO  |  |                                    | 0.0011361        |         | Silcoo   |  |

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 suppliemental annual report is true and accornate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the core every failing or the receiver or trusted emphasizes in the process of th