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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000089043 (8) CARJAM SHIPPING, INC.

FILED Jan 30 1998 8:00am Secretary of State

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Principal Plac	e of Business	Mailing Address		4 I MAII LAND F SIN INTILI INNEL MASES MAISS MAI	II OBIO) INJIN INIII BALIF NINNN IIIL INNE	
5507 NW 72		5507 NW 72ND AVE				
MIAMI FL 33	166	MIAMI FL 33166		DO NOT WRITE	IN THIS STACE	
				3. Date Incorporated or Qualified	IN THIS SPACE	
				10/15/1997		
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		165-0788922	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 мау Ве	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid		
24	9. Name and Address of Curr		30	Personal Property Tax due June 3 10. Name and Address of New Reg		
INI	CORPORATORS PLUS, INC.	ent neglatered Agent	81 Name / 1	1	Istered Agent	
	14 N UNIVERSITY DRIVE		Ct	HARLES KINKEAD		
, ·-	ANTATION FL 33322		82 Street Add	iress (P.O. Box Number is Not Acceptable	e) •	
] '-	ANTAHON I E 30322		83	CO : INVI 12 AVE	•	
1			84 City 1	IIAMI	FL 85 Zip Code し	
11. Pursuant to the provisions of Sections 607.0502 aft 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 Piorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar file, and accept the obligations of, Section 607.0505, Florida Statutes.						
office or a	registered abent, or both, in the Sta im familiar with, and accept the obt	te of Morida. Such change was at loatings of Section 607,0505. Flor	thorized by the corpora	ition's board of directors. I hereby accept	the appointment as registered	
SIGNATURE			VKFAD (Presi	1. 1	115 lag -	
SIGNATURE	Signature, typed or printed name of registered a	pent and little if applicable. (NOTE:	Registered Agent signature requ	red when reinstating)	DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	D D	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	KINKEAD, CHARLES		1.2 NAME			
STREET ADDRESS	5507 NW 72ND AVE		1.3 STREET ADDRESS		li li	
CITY-ST-ZIP	MIAMI FL 33166 D	DELETE	1.4 CITY - ST - ZIP			
TITLE	. -	E DETEIC	2.1 TITLE		☐ Change ☐ Addition	
NAME	STEWART, CARVEL 5507 NW 72ND AVE		2.2 NAME			
STREET ADDRESS	MIAMI FL 33166		2.3 STREET ADDRESS	*		
CITY-ST-ZIP	D	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition	
NAME	CHRISTIE, DELROY		3.1 TITLE 3.2 NAME		E Grange E Addition	
STREET ADDRESS	5507 NW 72ND AVE		3.3 STREET ADDRESS		ľ	
CITY-ST-ZIP	MIAMI FL 33166		3.4. CITY-ST-ZIP		1	
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition	
NAME	CHRISTIE, DWIGHT		4. 2 NAME			
STREET ADDRESS	5507 NW 72ND AVE		4.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33166		4.4 CITY-ST-ZIP			
TITLE	D	DELETE	5.1 TITLE		Change Addition	
NAME	BROWN, PATRICK		5.2 NAME		-	
STREET ADDRESS	5507 NW 72ND AVE		5.3 STREET ADDRESS		[
CITY-ST-ZIP	MIAMI FL 33166		5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. I hereby c	ertify that the information supplied	with this filing does not qualify for		Section 119.07(3)(i), Fiorida Statutes. I fu	rther certify that the Information	

oport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an interest of the same legal effect as if made under oath; that I am an interest and that my name appears in with an address.