	IJ,
AND ALLES	

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1 Corporation Name	<i>F</i> D'_	O	7	Λ	Λ	Ο.	`n	Ω	Ω	2	0	Λ
1. Corporation Name	_ F , =	7	,	U	U	V	· U	O	9	2	O	U

EXCESS FREIGHT SYSTEM CORPORATION

Principal Place of Business 8312 NW 56 STREET

MIAMI FL 33166

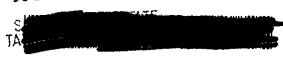
Mailing Address

8312 NW 56 STREET MIAMI FL 33166

FILED

3. Date Incorporated or Qualified

98 DEC 28 AM 10: 20



DO	NOT	WRITE	IN	THIS	SPACE

								ļ
	Drivering Phase of David	T. A			·	10/16/1997	,	
	Principal Place of Business	2a. Mailing Addres	3			4. FEI Number 65-0787746	L	Applied For
	8312NW 56ST-MIAMI-FL.				<u>} † </u>	03-0707740	_	Not Applicable
22	Suite, Apl. #, etc.	Suite, Apt. #, e	to.	·		5. Certificate of Status Desired		.75 Additional ee Required
'	City & State	City & State				6. Election Campaign Financing		5.00 May Be
<u>∓3</u>		28				Trust Fund Contribution		dded to Fees
24	Zip Country 25	Zip 29	30 Cou	ntry		8. This corporation owes or has paid the curre Personal Property Tax due June 30.	nt ye	
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
	81 Name							
DF	DP XAVIER, ANTONIO A 82 Street Address (P.O. Box Number is Not Acceptable)							
	1601 S.OCEAN DR	IVE, #504		В3				
	HOLLYWOOD, FL 33	019		}				1
		_		84	City	FL	85	Zip Code
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 (amiliar with and content to the purpose of changing its registered agent. I am (amiliar with and content to the purpose of changing its registered agent. I am (amiliar with and content to the purpose of changing its registered agent. I am (amiliar with and content to the purpose of changing its registered agent. I am (amiliar with and content to the purpose of changing its registered agent. I am (amiliar with and content to the purpose of changing its registered agent.)								
SIG	SIGNATURE NOV.17,1998							
	Signature, typed or printed name of positioned agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							

		c. registered rigen algridio	ing radoused writer (emissionsis) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME D STREET ADDRESS CITY-ST-ZIP	XAVIER ANTONIO DELETE 1601 S.OCEAN DR.#504 HOLLYWOOD-FLORIDA-33019	1.1 TITLE DP 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	XAVIER, ANTONIO Change Addition 1601 S.OCEAN DR. #504 HOLLYWOOD-FLORIDA-33019
NAME STREET ADDRESS CIT-ST-ZIP	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition 700002730157—4 -01/05/9901036017 ****150.00 ****150.00
TITLE	DELETE	31 TITLE	Change Addition

TITLE	DELETE	3.1 TITLE	Change Addition
HAME	And the state of t	3.2 NAME	
STREET ADDRESS	·	3.3 STREET ADDRESS	* ** ***
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME	•	4.2 NAME	
STREET ADDRESS	!	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME	į l	E 0 1144/E	

TITLE	OELETE	5.1 TITLE		Change Addition
NĪME		5.2 NAME		· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	, , , , , , , , , , , , , , , , , , ,	5.3 STREET ADDRESS	.1	
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	. DELETE	6.1 TITLE	(a)	Change Additi
NAME		6.2 NAME	\sim \sim \sim \sim \sim \sim \sim	
STREET ADDRESS		6 3 STREET ADDRESS	1 34 1	

CITY-ST-ZIP 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 Statues. 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 frustee 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 attach trend that my name address.

SIGNATURE:

ΤΪΤL NAM

NOV.17.1998

Daytime Phone #





8312 N.W. 56th Street Miami, Florida 33166 (305) 594-0700 (305) 594-1016 Fax: (305) 594-1788

Miami, 18 November, 1998

Department of State Division of Corporations 409 East Gaines Street TALLAHASSEE ~ FL 32399

SUBJECT: DOCUMENT # P-97000089280

Corp.Name; Excess Freight System

Corporation

Corp.Add: 8312 NW 56th Street

MIAMI -FL 33166

F.E.I. # 65-0787746

Gentleman/Madam,,

The situation of the economy in Brazil, had indeed obligated me to return there and search for new customers. Because, my corporation in Miami was not generating enough income for us to survive on it. I was in Brazil working hard to find the right Companies that i could represent them in the United States, and i Spent almost eight months overseas taking care of this matter. When i came back to The United States to start almost from scrath again, i found the Notice of DISSOLUTION OR REVOCATION OF MY CORPORATION, because it claims that i have failled to file THE 1998 CORPORATION ANNUAL REPORT. Gentleman/madam, with all my honesty I SWEAR, I DIDN'T KNOW ABOUT THIS REPORT otherwise i would have reported, than i panic and immediately called your Department and explainned the whole situation to MS.TREVOA on November 13,1998. She tolde me that they was going to waive the penalty this time and that would not be the next time. Than she reduced the fee to US\$150.00(one hundred and fifty dollars)., which I attached to the Application for Reinstatement.

And Iam take the opportunity to express my __deepliasted_appreciation_and_may GOD_bless_each_one_of_you_for_helping_me_ and furthermore would have been very hard for me to afford the original penalty. The APPLICATION FOR REINSTATEMENT with the check for US\$ 150.00 is on its way to you.

Antonio A.Xavier

EXCESS FREIGHT SYSTEM CORPORATION

DIRETOR-PRESIDENT