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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretar / of State DIVISION OF CORPORATIONS

DOOLINAENT #		_
DOCOMENT#	P9700009291	4

1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

DECO-CARGO, INC.

Principal Place	of Business	Mailing Address			ines thin ithin ithin each each
2250 SW 3RD A	AVENUE SUITE 100	2250 SW 3RD AVENUE SUITE	100		
MIAMI FL 33129		MIAMI FL 33129-2063		DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualifed	
				10/29/1997	
2. Principal 3	ace of Business	2a. Mailing Address		4. FEI Nur iber	Applied For
21		26		65-0795370	Not Applicable
Suite, Ap	#, etc.	Suite, Apt. #, etc.		5. Certifca e of Status Desired	\$8.75 Additional
22		27		3. Oct.iii aa 0 0, 0.0000 Doomaa	Fee Required
City & State	ė	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	Country	Trust Fund Contribution	Added to Fees
Zip —¬	Count y	Zip	-¬	This corporation owes the current year     Personal Property Tax.	☐ Yes ☐ No
24	0 Name and Address of	29 3 Current Registered Agent	<u> </u>	10. Name and Address of New Register	_ <del></del>
	9. Name and Address of	Current Teglatorea Agent	81 Name		
EFRO	ONSON, SIDNEY ESQ		99 01	Address (D.O. Day Number in Not Assessable)	
	SW 3RD AVENUE SUITE	100	82 Street	Address (P.O. Box Number is Not Acceptable)	
MIAN	/il FL 33129-2063		83		
			84 City		85 Zip Code
				_	
office or re agent, I ar	egistered agent or both in the	507.0502 and 607.1508, Florida Statules e State of Florida. Such change was aut e obligations of, Section 607.0505, Florid	norized by the corpo	co poration submit; this statement for the purpose oralion's board of directors. I hereby accept the ap	e of changing its registered printment as registered
SIGNATURE	Signature, typed or printed name of regis	tered agent and title if applicable. (NOTE R	egistered Agent signature i		
12.		ERS AND DIRECTORS	13.	ADDITIC NS/CHANGES TO OFFICERS	
TITLE	PD	☐ DELETE	1.1 TITLE	Manuel Fernandez, Presid	/
NAME	FERNANDEZ, MARGOT		1.2 NAME	2250 S.W. 3rd Ave. Direct	or
STREET ADDRESS	2250 SW 3RD AVENUE	SUITE 100	1.3 STREET ADDRESS	Suite 100   Miami, FL 33129-2063	
CITY-ST-ZIP	MIAMI FL 33129-2063	DELETE	14 CITY-ST-ZIP	Margot H. Fernandez, Secr	Change Addition
TITLE		☐ DECETE	2.1 TITLE		ecary -
NAME			2.2 NAME 2.3 STREET ADDRESS	2250 S.W. 3rd Ave. Dire   Suite 100	ector
STREET ADDRE 3S				Miami, FL 33129-2063	
CITY-ST-ZIP		☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	2 - 2000	Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP	į.		3.4, CITY-ST-ZIP		
TITLE	<del></del>	☐ 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			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			62 NAME		

14. I heret y certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0"(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 "2 or Block 13 if changes, or on an attachment with an address, with all other like empowered. SIGNATURE:

6 3 STREET ADDRESS

6.4 CITY-ST-ZIP

CR2E034 (11/98)