FILED Apr 30, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

	1999	SO WE THE	DIVISION OF CO	RPORATI	ONS	04-30-1	999 90005 02	0 ***150.0	J0
DOCUI	MENT # P9	800004	16298						
HEAUT	CARGO, INC.								
								SIER IIII IIII	
Principal Place of Business Mailing Address									
7012 NW 50TH STREET 7012 NW 50TH STREET MIAMI FL 33166 MIAMI FL 33166									
WILLIAM I E OCIO	·	·	All and the Course				WRITE IN THIS	SPACE	
						 Date Incorporated or Qu 05/20/1998 	alifed		
2. Principal Place of Business			2a. Mailing Address			4. FEI Number 65-08396	2/	<u> </u>	plied For
21		20	<u> </u>			63-08276			t Applicable
Suite, Apt.	#, etc.	2				5. Certificate of Status Desi	red 🔲	\$8.75 A	quired _
City & Stat	·· ·		City & State	•		6. Election Campaign Final Trust Fund Contribution	ncing	\$5.00 (
Zip	Country	_	Zip	Country	,	8. This corporation owes the	e current year into		
24	25	29		<u> </u>		Personal Property Tax. 10. Name and Address of	New Pegistered		□No
	9. Name and Addres	s of Current Rec	jisterea Agent	81	Name	10. Name and Address of	New Registered	ngent	
NICAISE, MICHAEL							t-bi-X		
7012 NW 50TH STREET			82 Stre			ress (P.O. Box Number is Not A	cceptable)		•
MIAMI FL 33166			83			· . · . · · · · · · · ·			
				84	City			85 Zip C	Code
			•		1		<u> </u>	.	
office or r	edictored agent or both	in the State of Flo	d 607.1508, Florida Statutes, orida. Such change was auth of, Section 607.0505, Florida	iorized by	the comparation	oration submits this statement fon's board of directors. I hereby	or the purpose of accept the appoi	changing its ntment as rec	registered gistered
SIGNATURE						idtit-li\	DATE		
12.	Signature, typed or printed name	of registered agent and t FICERS AND DI		13.	nt signature require	d when reinstating) ADDITIONS/CHANGES T		D DIRECTO	RS IN 12
TITLE	MANAGING DIRECTOR DELETE		1.1 TITLE				☐ Change	☐ Addition	
NAME	TRIC SEGUIN 12 7012 NW 50 THST		1.2 NAME						
STREET ADDRESS	7012 NW 50 74 51		1.3 STREE	TADORESS				j	
CITY-ST-ZIP	_	33166		1.4 CITY+S	T-ZIP				
TITLE	PRESIDE	NI	DELETE	2.1 TITLE]			Change	☐ Addition
NAME	FERNANSO		,	2.2 NAME					Ì
STREET ADDRESS	MIAMI, FL	23166		1	TADDRESS				1
CITY-ST-ZIP	MIAMI, FE		- DELETE	2.4 CITY-5	ST-ZIP +	 	;	Change -	- Addition
NAME				3.2 NAME					_
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP				3.4. CITY-5	ST-ZIP				
TITLE			☐ DELETE	4.1 TITLE		~-		Change	☐ Addition
NAME				4. 2 NAME			•		
STREET ADDRESS				4.3 STREE	TADDRESS				
CITY-ST-ZIP				4.4 CITY-S	T-ZIP			Change	Addition
TITLE			DELETE	5.1 TITLE 5.2 NAME				- Cliange	
NAME CIDEET ADDDESS					T ADDRESS				
STREET ADDRESS				5.4 CITY-S		•			
TITLE		1.4.4	☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAMÉ				6.2 NAME					İ
STREET ADDRESS				6.3 STREE	T ADDRESS				
	1			64 CETY-S	T. 7IP				

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 or the receiver 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 attactiment with an address, with all other like empowered.

SIGNATURE: ⊻

305-591-0619