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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

	1999	
DOCL	JMENT	#

1. Corporation Name

198000051418

Mailing Address

/

TERRAMAIRE LOGISTIC GROUP, CORP.

Principal Place of Business

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

MIAMI, FL33166

#4730™NEU#0'€h AVENUE

P.O. BOX 590805 MIAMI, FL 33159-0805 May 13, 1999 8:00 am Secretary of State

05-13-1999 90047 008 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

i									
2. Principal F	Place of Business	2a. Mailin	ng Address	_			4. FEI Number	l Ar	oplied For
21		26 C/	O PEREZ,	BEH	AR 8	ASS	65-0840195	No	ot Applicable
Suite, Apt.	. #, etc.	Suite.	Apt. #, etc.					\$8.75	Additional
22		27 14	730 N.E.	10	TH P	VENU:	E5. Certifcate of Status Desired	Fee Re	equired
City & Sta	ite		& State				6. Election Campaign Financing	\$5.00	May Be
23		28 N	MIAMI, F	<u>՝ L 3</u>	<u>3161</u>		Trust Fund Contribution	Added 1	to Fees
Zip	Country	Zip		Cou	ntry		8. This corporation owes the current year )	ntangible	
24	25	29		30			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered /	Agent				10. Name and Address of New Registere	d Agent	
DEDE	Z. BEHAR & ASSOCI	ΛΨΕς	TNC		81 Na	me			
	O N.E. 10TH AVENU	•	INC.		<b>82</b> Str	eet Addres	ss (P.O. Box Number is Not Acceptable)		
	<del>-</del>	Ľ			-	001,100,00	( i.e. bek italijes ie iteriteseptes)		
N MI	AMI, FL 33161			Ī	83				
					04 00			A.   3:-	
					84 Cit	у	F	L 85 Zip (	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508	8, Florida Statutes	the ab	ove-nan	ned corpor	ration submits this statement for the purpose of	of changing its	registered
	registered agent, or both, in the State o					orporation	's board of directors. I hereby accept the app	pintment as re	gistered
•	, ,	ons or, sectio	III 607.0303, FIORIC	ja Statu	ies.				
SIGNATURE	Signature, typed or printed name of registered agent	dispilant it etht bos	le. (NOTE: R	leaistered	Agent signa	ture required w	when reinstating) DATE		
12.	OFFICERS AND		<del></del>	13.	3		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	ORS IN 12
TITLE	DP?		X DELETE	11 TIT	LE	REG	ISTERED AGENT	Change	Addition
NAME	= =	र गा		1.2 NA	ME		EZ, BEHAR & ACCOCIAT	••	
STREET ADDRESS	MONTANEZARELYSAB   7899 NE BAY <b>SHOR</b> E		3 A	1.3 ST	REET ADDR	ESS 1 4 7	30 N.E. 10TH AVENUE	20,1110	
CITY-ST-ZIP	MIAMI, FL 33138	C1. #	J.D.		Y-ST-ZiP	N M	IAMI, FL 33161		
TITLE	DVP		X DELETE	2.1 TIT				Change	☐ Addition
NAME	MANDONADO, PATRIC	га мар	T 7	2.2 NA	ME				_
STREET ADDRESS	<b>-</b> ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			23 ST	REET ADDR	FSS			
CITY-ST-ZIP	MIAMI, FL 33138	O = 11	J	l l	TY-ST-ZIP				
TITLE	— <u> </u>		X DELETE	31 717		<del></del>		Change	Addition
NAME	C.E.O. ALVES, MARILYN			3.2 NAI	_				
STREET ADDRESS	II	CT .4	3A		VIE REET ADDR	Eee			
	MIAMI, FL 33138	CI. B	JA	n		E->>			
CITY-ST-ZIP	DIRECTOR		ĭ <b>X</b> DELETE	4.1 TIT	Y-ST-ZIP			☐ Change	Addition
	RUIZ, MARIO		CAN DELETE					□ change	
NAME	17899 NE BAVSHORE	CT - #	3A	4. 2 NA					
STREET ADDRESS	MIAMI, FL 33138	"		i i	REETADDR	ESS			ł
CITY-ST-ZIP				#	Y-ST-ZIP				A datate
TITLE			□ DELETE	5.1 TITI	.Ę	- 1		Change	☐ Addition

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 suppliemental 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 attachment with an address, with all other like empowered.

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.4 CITY-ST-ZIP

64 CITY-ST-ZIP

SIGNATURE: SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 (305)949-4738

CR2E034 (11/98)

-

Addition

☐ Change