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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

C.P. SHIPPING & CARGO INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place	of Pusiness	Mailing Address				BII OFBIA BIBIA OFBIA WEEL ROP	11
,		-	•				
3701 NV SOUTH RIVER DR. MIAMI FL 33142		3701 NW SOUTH RIVER DR. MIAMI FL 33142					
WINAMI (C 00)	**	MINIMA TE OUTE			DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified		
					04/19/1991		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied Fo	or
21		26			65-0311075	Not Applic	able
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additions	al	
22		27		5. Optimidate of classes beginde	Fee Required		
City & State	•	City & State			6. Election Campaign Financing	\$5.00 May Be	,
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	1	8. This corporation owes or has paid the c		
24	25		30		Personal Property Tax due June 30.	Yes No	
	9, Name and Address of Current	Hegistered Agent	81	Name	10. Name and Address of New Registered	1 Agent	
	RRA, PEDRO A		"	INATHE			
)1 NW SOUTH RIVER DR.		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
MIA	MI FL 33142						
			83				
			84	City		85 Zip Code	
					FI	<u> </u>	
11. Pursuant t	o the provisions of Sections 607.0502	and 607,1508, Florida Statute	s, the above	e-named cor	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its register	ed l
agent. I ar	n familiar with, and accept the obligat	tions of Section 607.0505, Flor	rida Statute:	6.	thorro board of directors. Thereby decopt the up	pominion do register	·]
SIGNATURE					·		
	Signature, typed or pointed name of registered agen	· - · · - · - · - · - · - · · · · ·		ert signature requ	red when reinstating) DATE		=
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PT PARPA PEOPO A	DELETE	1.1 TITLE	}		Change Add	ailion
NAME]	PARRA, PEDRO A		1.2 NAME				
STREET ADDRESS	\$701 NW SOUTH RIVER DR.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T-ZIP			
TITLE	P	DELETE	2.1 THE	}		Change Add	dilion
NAME	PARRA, CARLOS A		22 NAME	ļ			
STREET ADDRESS	8701 NW SOUTH RIVER DR.		23 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33142		2 4 CITY-	ST - ZIP]
TITLE		DELETE	3.1 TITLE	-		☐ Change ☐ Add	dition
NAME			3.2 NAME	Ì			Į
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	148.		
TITLE		DELETE	4 1 TITLE			Change Add	dition]
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	1- Z IP]
TITLE		DELETE	5 1 THILE			Change Add	dition
NAME			5.2 NAME				
STREET ADDRESS			53 STREET	ADDRESS			
CITY-ST-ZIP			5.4 City-S	T-ZIP			
TITLE		☐ DELET E	6.1 TITLE			Change Add	dition
NAME			6.2 NAME				
STREET ADDRESS		/)	63 STREET	ADDRESS			
CITY-ST-ZIP	/ /.	/. /	6.4 C(TY-S				
14. I hereby c	ertify that the information supplied wit	this liling does not qualify for			Section 119.07(3)(i), Florida Statutes. I further	certify that the informa	ition
indicated of officer or officer o	on this annual report or supplier of that director of the corporation of the receive	anniral report is true and accu ver or trustee empowered to e	arate and the execute this	at my signat: report as red	n Section 119.07(3)(i), Florida Statutes. I further our shall have the same legal effect as if made unuired by Chapter 607, Florida Statutes; and tha	inger oain; that I am a I my name appears in	TL)
Block 12 c	or Block 13 changed, or on a altic	hm an address.					