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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1998
DOCUMENT #

SIGNATURE:

S5477

(8)

GINE-PRIS FREIGHTWAYS, INC.

Secretary of State

305-477-6062

FILED

Feb 24 1998 8:00am

Principal Place of Business Mailing Address							BARIT BIEST SABL
3399 N.W. 72ND AVENUE SUITE 211 MIAMI FL 33122		3399 N.W. 72ND AVENUE Suite 211 Miami Fl 33122		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 05/22/1991		
	ace of Business	2a. Mailing Address			4, FEI Number		pplied For
21 Suite And Highe		[26]			65-0274156		lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional lequired
City & State	<u> </u>	City & State			6. Election Campaign Financing		
23		28			Trust Fund Contribution		May Be to Fees
Zip	Country	Ζιρ	Country		8. This corporation owes or has paid the		
24	25	29	30		Personal Property Tax due June 30.		☐ No
	9, Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registe	red Agent	
T/	VILLADE, KARINA		81	Name			
33	99 N.W. 72ND AVENUE		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	JITE 211						
M	IAMI FL 33122		83				
			84	City		85 Zip	Code
				,		FL	
office or re	o me provisions or sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the obli	ie of Florida. Such change was a	uthorized by	the corpora	poration submits this statement for the purpo- ation's board of directors. I hereby accept the	appointment as	ns registered s registered
	Styriation typnistic printed more of my benefit	Octor distle it apple shot (NOTE	Registered Age	ont signature requ	pired when reinstating) DA	TE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PSTD	L] DELETO	1.1 TITLE			L] Change	Addition
NAME	TAILLADE, KARINA		1.2 NAME				
STREET ADDRESS	3399 N.W. 72ND AVE #21	1	1 3 STREET	ADDRESS			
CITY+S1-ZIP	MIAMI FL	Dritti	1.4 CITY - S	1 - ZIP		Channe	Augustan
TITLE		L.J. DELETE	21 TITLE			☐ Change	Addition
NAME			2 2 NAME 2 3 Street Address				
STREET ADDRESS							
CITY-ST-ZIP TITLE		DELETE	2 4 CITY-: 3 1 TITLE	ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			33 STREET	ADDRESS			
CITY +ST - ZIP			3 4. CITY-1				
TITLE	and manufactures and a february factor of the first of the	DELETE	41 TITLE			☐ Change	Addition
NAME			4 2 NAME			•	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S				
TIFLE	THE RESIDENCE OF THE PARTY OF T	DELFTE	5 1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			52 NAME				
STREET ADDRESS			5 3 STREET	ADDRESS			
CITY-S1-ZIP			5.4 CITY-S	T-ZiP			
TITLE	☐ DELETE		61 TITLE			Change	Addition
NAME			62 NAME				
STREET ADDRESS		10	6.3 STREET	ADDRESS			
CITY-S1-ZIP		• (//)	64 CHY-S				
14. I hereby or indicated a	ertify that the information supplied on this annual report of suppliener	tal an analement is true and accu	urate and th	at my signati	n Section 119.07(3)(i), Florida Statutes. I furthoure shall have the same legal effect as if mad	e under oath⊹th	natlam an I
officer or c	hrector of the corporation or the re ir Block 13 if changed, or organ all	cover diffustee empowered to east own with an address	execute this	report as rec	quired by Chapter 607, Florida Statutes; and t	nat my name ar	opears in