04-26-1999 90247 005 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **\$79352**

1. Corporation Name

FASTCARGO LOGISTICS, INC.

Principal Place of Business	Mailing Address) 010 () 0(01) 010); 010) 611)(1 0101) 1001
4468 NW 74 TH AVE.	4488 NW 74TH AVE.				
MIAMI-FL-33166	MIAMI FL 33108		DO NOT IMPLE IN	LTING ODACE	
			DO NOT WRITE IN 3. Date Incorporated or Qualifed	THIS SPACE	
			09/11/1991		
B. Dringing Class of Business	2a. Mailing Address		4. FEI Number	Apr	lied For
2. Principal Place of Business 21 3505 NW 113 LOUCT	26 3505 NW 1	13 Court	65-0284100		Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	110 00.0	_	\$8.75 A	
32	27		5. Certificate of Status Desired	Fee Reg	
City & State	City & State		6. Election Campaign Financing	\$5.00 1	/lay Be
23 Miani Morida	28 Miari	HoridA.	Trust Fund Contribution	Added to	- 1
Zip Cour try	Zip	Country	8. This corporation owes the current y		
24 33 (78 25 USA	29 35118 3	30 USA·	Persor al Property Tax.		2 490
g. Name and Address of Current	Registered Agent		10. Name and Address of New Regis	tered Agent	
AUTHERED BODOFD A		81 Name			
MENEZES, RODGER A.		82 Street Ac dr	ress (P.O. Box Number is Not Acceptable)		
44 68 NW 74TH AVE?			NW 113 COUR	<u> </u>	
MIAMI-FL 33168		83			
		84 City		85 Zip C	ode.
		Nic	wi	FL 3	<u> </u>
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Stati tes	s, the above-named corp	poration submits this statement for the purp	ose of changing its rec	egistered
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligat	t Florida. Such enange was aut Jone of, Section 607.0505, Florid	da Statutes.	A	appointment as reg.	
SIGNATUFE	// Rodger	A. Menezes	President 305-	592-337 ATE 04-22	14-
Signature, typed of prighted name of registered agen		Registered Agent signature require			
	DURECTORS	15.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOF	S IN 12
TITLE D	DELETE	1.1 TITLE		Change	[_] Addition
MENEZES, RODGER A.	1	1.2 NAME			
STREET ADDRESS 8150 S.W. 187 TERRACE		1.3 STREET ADDRESS			
CITY-ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP		Change	Addition
TITLE D	DELETE	2.1 TITLE		☐ Change	Modition /
NAME MENEZES, KRISTINA		2.2 NAME			1
STREET ADDRESS 8150 S.W. 187 TERRACE		2 3 STREET ADDRESS			- [
CITY-ST-ZIP MIAMI FL		2. 4 CITY-ST-ZIP			- Addition
TITLE	☐ DELETE	3.1 TITLE		Change	Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP		[] Change	Addition
TITLE	☐ DELETE	4.1 TITLE		Change	
NAME		4 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP	- Chelete	4.4 CITY-ST-ZIP		Change	Addition
TITLE	☐ DELETE	5.1 TITLE		☐ Criange	
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP 6.1 TITLE		Change	Addition
TITLE	DELETE			☐ Change	
NAME		6.2 NAME			
STREET ANDRESS		6.3 STREET ADDRESS			

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

6.4 CITY-ST-ZIP

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 attact ment with an address, with all other like empowered.