FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # \$82547

(8)

ALPHATRANS INTERNATIONAL FREIGHT FORWARDERS, INC

Principal Place of Business

Mailing Address



2905 N.W. 82ND AVE. MIAMI: FL 33122		2905 N.W. 82ND AVE. MIAMI FL 33122			
				3. Date Incorporated or Qualified 09/25/1991	3a. Date of Last Report 06/19/1995
2. Principal Place		2a. Maling Address		4. FELNumber	Applied For
21 082	5 NW 33 ST	26 /0825 Nu	U 33 ST	65-0292361	Not Applicable
Suite, Apt. #, etc. 22		Suite. Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Crty & State		City & State 28 MIAMI	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
^{Zp} 2 <i>A/</i> ∕	72 ZS Country USA	3317.2	Country 30 USA	8. This corporation has liability for it Florida Statutes Yes	intangible tax under s=199 032; ☐ No
24 33/	9. Name and Address of Curren	1 Registered Agent	30 007	10. Name and Address of New R	
	9. Name and Address of Current	i negistered Agent	81 Name		
2905 N	N, RUDOLF W 82 AVE FL 33122		83	dress (P.O. Box Number is Not Acceptab スチールルー・3 3 S T	
			84 City	MIAMI	FL 85 Zip Code ラシノフン
or registered	the provisions of Sections 607,0502 diagent, or both, in the State of Florid , and accept the obligations of, Sect	1a. Such change was authorzed.	the above named corp by the corporation's bo	oration submits this statement for the purant of directors. I hereby accept the app	roose of changing its registered office
SIGNATURE			Rug dered Agent signature regil	red vitari renistatir d	nale
12.	grafilie Typical de productirainal et registere d'autorit OFFICERS AN		13.	ADDITIONS/CHANGES TO OFF	
TITLE	D OFFICERS AN	DELETE	1 TIFLE		Change Addition
NAME	WENNIN, RUDOLF	_	1.2 NAME		
STREET ADDRESS	2905 N.W. 82ND AVE		1 3 STREYT ADDRESS	10825 NW 33 ST	
CITY - ST - ZIP	MIAMI FL	} [14 CITY - ST - 7-P	MIAMON FL 3317.	عـ
TITLE	D	DELETE	2 1 HTLF		Change Addition
NAME	WENNIN, HELMUTH	-	2.2 NAME		
STREET ADDRESS	2905 N.W. 82ND AVE -		2.3 STREET ADDRESS		
CITY ST 2IP	MIAMI FL		2.4 CITY - ST - ZIP		
TITLE		☐ DELETE	3 1 TIFLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 CITY - \$1 - ZIP		
T TLE		☐ DELETE	4 1 7-TEF		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CI1Y - S1 - ZIP		
TITLE		☐ DELETE	5 1 fill.£		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADURESS		
C'TY-ST ZIP			54 CHY-ST-ZIP		
TITLE		☐ DELETE	6 UTHE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CHY+ST-ZIP			64 CITY ST-7IP		
14. 1 do hereby	certify that the information supplied	with this fling is voluntarily furnish	hed and does not quaif	y for the exemption stated in Section 119	J.07(3)(k), Florida Statutes. I further

14. I do hereby certify that the information supplied with this firing is voluntarily furnished and does not quarity for the exemption stated in Section 1.19.07(a)(k), Florida Statutes. Flatner 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 risce via 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 glianged, or on an attachment with an address.

SIGNATURE:

WELLINGTH WENNING OFFICER OR DIRECTOR

2/16/91

(305)5914032

DDE03/ (10/05)