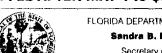
## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

## **PROFIT** CORPORATION ANNUAL REPORT 1997

2. Principal Place of Business

21



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

OCUMENT #	V12	127	(9
SOUTH AMERICAN	FRFIGHT	INTERNATIONAL.	INC

Principal Place of Business Mailing Address

6142 NW 74 AVENUE MIAMI FL 33168

6142 NW 74 AVENUE MIAMI FL 33166-3710

2a. Mailing Address

## **FILED** Apr 11 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

Not Applicable

03/29/1996

3. Date Incorporated or Qualified

02/06/1992

65-0312028

4. FEI Number

Suite, Apt	#. etc.	Suite, Apt. #, etc.				Certificate of Status Desired     See Regulred     Fee Regulred						
22] City & State			City & State			& Election Compaign Financian	<del></del>		<u> </u>			
23		28				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t				
Zip	Country	Zip	<b></b>	Country		8. This corporation has liability for			. 199.032,			
24	25	29				Florida Statutes X Yes No						
Name and Address of Current Registered Agent				221		10. Name and Address of New F	legistered .	Agent				
PEREZ, MARILU				61	Name							
6110 N.W. 74 AVE. MIAMI FL 33166				82 Street Address (P.O. Box Number is Not Acceptable)								
				63					}			
				84	City			85 Zip (	Code			
							FL					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered												
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE												
	Signature, it, set or product name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE											
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND					
MILE	PT	DELETE	1.1 Ti	TLE				Change	☐ Addition			
NAME	PEREZ, MARILU		12 N/	AME								
STREET ADDRESS	8142 NW 74 AVENUE	1.38			DORESS							
CHY+S1+2⊪	MIAMI FL			TY-ST-	ZIP							
7110 8	V	DELETE	2 1 11	TLE	1			Change	Addition			
NAME	BERMUDEZ, MARIA ANTONI	ET	2.2 N	AME	)							
STREET ADDRESS	6142 NW 74 AVENUE		2.3 \$1	TREET A	DORESS				ļ			
CITY - S1 - 7/5	MIAMI FL			HY-\$1	-ZIP			T-1				
Till (F		☐ DELETE	3.1 T)	TLE	1			Change	Addition			
NAM <sub>5</sub>			3.2 N/	AME	[							
STREET ADDRESS			3.3 S1	TREET A	DDRESS	•			}			
City St. 7th	and the second second of the second s			ITY-ST	- ZIP							
TILLE		☐ DELETÉ	4.1 1(		- 1			Change	Addition			
NAME			4.2 N									
STREET ADDRESS			4.3 \$1	REET A	DDRESS				ĺ			
C(Ty+S) 7(P				ITY-ST	ZIP							
THILE		DELETE	5.1 Tr					Change	Addition			
NAME			5.2 N	AME								
STREET ADDRESS	in		5.3 S1	TREET A	DDRESS							
CHY ST-745				TY-ST-	ZIP			r-1				
Blti		DELETE	61 TI		1			Change	☐ Addition			
N <sub>2</sub> N <sub>1</sub>			6.2 N						ļ			
STREET ADDRESS					DDRESS				}			
City - St - 70°	·	21	64C	ITY-ST	ZIP	1. 0. N. 146 07 0V 50 11 5	12 -					
<b>14.</b> I do heret Informatio	by certify that the information supplied indicated on this angual report of	ied with this filing does not qua r supplemental annual report is	aiiry for the strue and a	exerr accur	nption stated ate and that	in Section 119.07(3)(i), Florida Statu my signature shall have the same le	tes. I furthe pal effect a:	r certify that s if made un-	tne der oath; that			
Land an officer or director of the corpolation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name												
appears (	14. I do 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 angual 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 this corporation or the receiver or instee embowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 if changed, on an attrictment with an officer.											