


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 30, 2006 8:00 am**  
**Secretary of State**

01-30-2006 90040 003 \*\*\*150.00

DOCUMENT # F9600006337					
1. Entity Name POLAR AIR CARGO, INC.					
Principal Place of Business 2000 WESTCHESTER AVE ATTN: CORPORATE TAX DEPT PURCHASE, NY 10577		Mailing Address 2000 WESTCHESTER AVE ATTN: CORPORATE TAX DEPT PURCHASE, NY 10577			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 33-0420245	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CEO	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ERICKSON, JEFF		NAME		
STREET ADDRESS	2000 WESTCHESTER AVE		STREET ADDRESS		
CITY-ST-ZIP	PURCHASE, NY 10577		CITY-ST-ZIP		
TITLE	COO	<input checked="" type="checkbox"/> Delete	TITLE	CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, WAKE		NAME	MICHAEL BARNA	
STREET ADDRESS	2000 WESTCHESTER AVE		STREET ADDRESS	2000 WESTCHESTER AVE.	
CITY-ST-ZIP	OURCHASE, NY 10577		CITY-ST-ZIP	PURCHASE, NY 10577	
TITLE	VPT	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADLEY, WILLIAM		NAME		
STREET ADDRESS	2000 WESTCHESTER AVE		STREET ADDRESS		
CITY-ST-ZIP	PURCHASE, NY 10577		CITY-ST-ZIP		
TITLE	CMO	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANE, RONALD		NAME		
STREET ADDRESS	2000 WESTCHESTER AVE		STREET ADDRESS		
CITY-ST-ZIP	PURCHASE, NY 10577		CITY-ST-ZIP		
TITLE	VPS	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NUTTALL, RICHARD		NAME		
STREET ADDRESS	2000 WESTCHESTER AVE		STREET ADDRESS		
CITY-ST-ZIP	PURCHASE, NY 10577		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIETRICK, JOHN		NAME		
STREET ADDRESS	2000 WESTCHESTER AVE		STREET ADDRESS		
CITY-ST-ZIP	PURCHASE, NY 10577		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>L.L. Hutchinson</i>		VP, Controller		01/11/06 914-701-8000	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	