

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90118 049 ***150.00

DOCUMENT # P94000070580

1. Entity Name
INTERNATIONAL FREIGHT SERVICES, INC.



Principal Place of Business 10125 NW 116TH WAY STE 18 MIAMI FL 33178 US	Mailing Address 10125 NW 116TH WAY STE 18 MIAMI FL 33178 US
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2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country

CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0527583** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MOUTTET, PAUL G
10125 NW 116TH WAY
STE #18
MIAMI FL 33178**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C <input type="checkbox"/> Delete
NAME	MOUTTET, PAUL G
STREET ADDRESS	10125 NW 116TH WAY STE 18
CITY-ST-ZIP	MIAMI FL 33178
TITLE	P <input type="checkbox"/> Delete
NAME	RODRIGUEZ, GRAEME
STREET ADDRESS	10125 N.W. 116TH WAY STE 18
CITY-ST-ZIP	MIAMI FL 33178
TITLE	V <input type="checkbox"/> Delete
NAME	HERRERA, ALAN D
STREET ADDRESS	10125 NW 116TH WAY STE 18
CITY-ST-ZIP	MIAMI FL 33178
TITLE	D <input type="checkbox"/> Delete
NAME	HADDAD, ROBERT
STREET ADDRESS	10125 NW 116TH WAY #18
CITY-ST-ZIP	MIAMI FL 33178
TITLE	CFO <input checked="" type="checkbox"/> Delete
NAME	BLANCO, MARIO R
STREET ADDRESS	10125 NW 116TH WAY STE 18
CITY-ST-ZIP	MIAMI FL 33178
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 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: *Stok...* **SIGNATURE REQUIRED** Date: **04/21/03** Daytime Phone #: **(305) 863-9414**

CR2E034 (10/02)