

2001 UNIFORM BUSINESS REPORT (UBR)

1 of 2

DOCUMENT # P99000012134
1. Entity Name
 Asset Freight + Courier Service Corporation

FILED

01 DEC 21 PM 12:13

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business **Mailing Address**

2. Principal Place of Business **3. Mailing Address**
 404 Capistrano Drive P.O. Box 30775
 Suite, Apt. #, etc. Suite, Apt. #, etc.

2000-2001 UBR

City & State **City & State**
 Palm Beach Gardens, FL Palm Beach Gardens, Florida
Zip **Country** **Zip** **Country**
 33410 USA 33420 USA

4. FEI Number **Applied For**
 65-0897269 Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Barbara Elisius
 414 S.E. 7th Avenue
 Delray Beach, FL 33483

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.
SIGNATURE Barbara Elisius Barbara Elisius 11-5-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001, Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Carolyn Elisius 404 Capistrano Drive Palm Beach Gardens, Florida 33410	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	100004880151 -02/05/02--01037--025 ***300.00 ***300.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carolyn Elisius Carolyn Elisius 11-5-01 (561) 655-5527
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Cayman Phone #

CR2E034 (1/1/00)

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ASSET FREIGHT & COURIER SERVICE, INC.
P.O. BOX 30775
PALM BEACH GARDENS, FL 33420

October 26, 2001

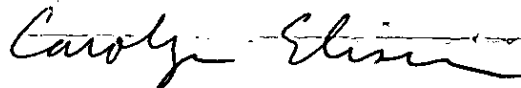
Secretary of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madame,

Enclosed please find a check in the amount of \$^{158.75}~~150.00~~, which represents the 2001 Annual Corporate Filing Fee. I never received the 2001 Uniform Business Report in the mail, and therefore did not file it timely. I was relying on my accountant to help me with my corporate filing requirements and she did not notify me regarding the Annual Corporate Report filing requirement. I am humbly requesting that you accept this fee as my payment in full for the year 2001 and please abate the penalties added to the reinstatement fee.

Thank you for your consideration.

Sincerely,



Carolyn Elsius