

2000 UNIFORM BUSINESS REPORT (UBR)

4/2

FILED
May 22, 2000 8:00 am
Secretary of State

04-24-2000 90033 011 ***150.00

DOCUMENT # 670307

1. Entity Name

FRONTIER FREIGHT FORWARDERS, INC.

Principal Place of Business

Mailing Address

706 MISSION ST., STE. 1000
 SAN FRANCISCO CA 94103

706 MISSION ST., STE. 1000
 SAN FRANCISCO CA 94103-3113

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

94-2728971

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GAZTUA, RALPH
2970 NW 75TH AVE.
MIAMI FL 33122

Name

Al Benki

Street Address (P.O. Box Number is Not Acceptable)

10000 NW 25 Street

City

Miami

FL

Zip Code
33172

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

[Signature]

Al Benki

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PDC** ☐ Delete
 NAME **FRITZ, LYNN C.**
 STREET ADDRESS **706 MISSION ST.**
 CITY-ST-ZIP **SAN FRANCISCO CA 94103**

TITLE **EVP, COO, D** ☐ Change ☒ Addition
 NAME **Smith, Raymond**
 STREET ADDRESS **706 Mission Street**
 CITY-ST-ZIP **San Francisco, CA 94103**

TITLE **VDI** ☒ Delete
 NAME **AROVAS, ROBERT**
 STREET ADDRESS **706 MISSION ST.**
 CITY-ST-ZIP **SAN FRANCISCO CA 94103**

TITLE **VP, CFO** ☐ Change ☒ Addition
 NAME **Dutt, Ronald**
 STREET ADDRESS **706 Mission Street**
 CITY-ST-ZIP **San Francisco, CA 94103**

TITLE **VD** ☒ Delete
 NAME **PEJINO, DENNIS L**
 STREET ADDRESS **706 MISSION ST.**
 CITY-ST-ZIP **SAN FRANCISCO CA 94103**

TITLE **VP, S, D** ☒ Change ☐ Addition
 NAME **Raymond, Jan H.**
 STREET ADDRESS **706 Mission Street**
 CITY-ST-ZIP **San Francisco, CA 94103**

TITLE **VS** ☐ Delete
 NAME **RAYMOND, JAN H**
 STREET ADDRESS **706 MISSION ST.**
 CITY-ST-ZIP **SAN FRANCISCO CA 94103**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **AVFM** ☐ Delete
 NAME **ELLIE, LINDA K**
 STREET ADDRESS **706 MISSION ST.**
 CITY-ST-ZIP **SAN FRANCISCO CA 94103**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan H. Raymond

4/10/00

Date

415-538-0422

Daytime Phone #

CR2E034 (9/99)