


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 08:00 AM
Secretary of State

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| DOCUMENT # 683889 1. Entity Name CARIBBEAN AMERICAN FREIGHT, INC. |  |
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| Principal Place of Business 9393 N.W. 13 STREET MIAMI, FL 33172 US | Mailing Address PO BOX 521191 (33152) MIAMI, FL 33152 US |
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DO NOT WRITE IN THIS SPACE



04142007 No Chg-P CR2E034 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 59-2063700 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent GLOBAL MANAGEMENT VENTURES INC 9391 NW 13 STREET MIAMI, FL 33172 |
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DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD GUEITS, JAIME F JR 755 WEST 60 STREET HIALEAH, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S NANCY RANGEL 9393 N.W. 13 STREET MIAMI, FL 33172 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MARCO MARIN 7750 S.W. 32 STREET MIAMI, FL 33155 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

DO NOT WRITE IN THIS SPACE

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05/01/07-80048-019 150.00

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/07 305-592-2225
Date Daytime Phone #