

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90263 001 ****61.25

DOCUMENT # 703023



1. Entity Name
THE FLORIDA CUSTOMS BROKERS AND FORWARDERS ASSOCIATION, INC.

Principal Place of Business
5600 N.W. 36TH STREET
SUITE 611
MIAMI SPRINGS FL 33166

Mailing Address
P.O. BOX 522022
MIAMI FL 33152



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2103610**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FCBF
5600 N.W. 36TH STREET
SUITE 611
MIAMI SPRINGS FL 33166

Name

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

City

Zip Code

8. The above named entity admits 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]*
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 2/6/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	MADAN, ROGER	5600 N.W. 36TH STREET, SUITE 611	MIAMI SPRINGS FL 33166	<input type="checkbox"/>
VPD	PASQUIS, GISELE	5600 N.W. 36TH STREET, SUITE 611	MIAMI SPRINGS FL 33166	<input type="checkbox"/>
VPD	PIGNATO, DAMIANO	5600 N.W. 36TH STREET, SUITE 611	MIAMI SPRINGS FL 33166	<input type="checkbox"/>
SD	MARINO, ALBERTO JR	5600 N.W. 36TH STREET, SUITE 611	MIAMI SPRINGS FL 33166	<input type="checkbox"/>
TD	VERSACI, DANTE II	5600 N.W. 36TH STREET, SUITE 611	MIAMI SPRINGS FL 33166	<input type="checkbox"/>
C	ABISCH, JOHN	5600 N.W. 36TH STREET, SUITE 611	MIAMI SPRINGS FL 33166	<input type="checkbox"/>

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

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 617, 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]*
SIGNATURE REQUIRED

DATE: 2/6/03 (305) 499-9490
Daytime Phone #

CR2E037 (10/02)