

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 815835

1. Entity Name

ABX Logistics (USA) Inc.

Principal Place of Business

Mailing Address

8010 Roswell Road
Suite 300
Atlanta, GA 30350

8010 Roswell Road
Suite 300
Atlanta, GA 30350

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

13-5543269

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Spencer Strader

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

8501 N.W. 17th Street, Suite 120

City

MIAMI

FL

Zip Code

33126

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, 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 | President | <input type="checkbox"/> Delete |
| NAME | Albert Zetter | |
| STREET ADDRESS | 8010 Roswell Rd, Ste 300 | |
| CITY-ST-ZIP | Atlanta, GA 30350 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | Frank Guenzerdt | |
| STREET ADDRESS | 8010 Roswell Rd, Ste 300 | |
| CITY-ST-ZIP | Atlanta, GA 30350 | |
| TITLE | Secretary | <input type="checkbox"/> Delete |
| NAME | Christiane Buehler | |
| STREET ADDRESS | 8010 Roswell Rd, Ste 300 | |
| CITY-ST-ZIP | Atlanta, GA 30350 | |
| TITLE | Director | <input type="checkbox"/> Delete |
| NAME | Jean-Louis Dernaux | |
| STREET ADDRESS | 8010 Roswell Rd, Ste 300 | |
| CITY-ST-ZIP | Atlanta, GA 30350 | |
| TITLE | Director | <input type="checkbox"/> Delete |
| NAME | Marie-Ghislaine Henuet | |
| STREET ADDRESS | 8010 Roswell Rd, Ste 300 | |
| CITY-ST-ZIP | Atlanta, GA 30350 | |
| TITLE | | <input type="checkbox"/> Delete |
| 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 |
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| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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:

C. B. W.

Secretary

4/20/00

(770) 353-4200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)