FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 24, 2001 8:00 am Secretary of State **DOCUMENT # 815835** ABX LOGISTICS (USA) INC. 01-24-2001 90083 039 ***150.00 Principal Place of Business Mailing Address 8010 ROSWELL ROAD 8010 ROSWELL ROAD SUITE 300 SUITE 300 可ひユマー ATLANTA GA 30350 ATLANTA GA 30350 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 13-5543269 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 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 NW 17TH ST **STE 120** MIAMI FL 33126 Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE Delete TITLE ☐ Change ☐ Addition GUENZERODT, FRANK NAME NAME STREET ADDRESS 8010 ROSWELL RD #300 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ATLANTA GA 30350 ☐ Addition TITLE ☐ Delete TITLE Change ZEITLER, ALBERT NAME NAME STREET ADDRESS 8010 ROSWELL RD STE 300 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30350 CITY-ST-ZIP TITLE --- -☐ Delete TITLE ☐ Addition Change **BUCHLER, CHRISTIANE** NAME NAME STREET ADDRESS 8010 ROSWELL RD STE 300 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30350 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete ☐ Change DERMAUX, JEAN-LOUIS NAME NAME STREET ADDRESS 8010 ROSWELL RD STE 300 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30350 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition HENUSET, MARIE G NAME STREET ADDRESS 8010 ROSWELL RD STE 300 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30350 CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Daytime Phone #