FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 90289 021 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F01000001342

90125880

1. Entity Name
DHL WORLDWIDE EXPRESS, INC.

Principal Place of Business	Mailing Address
50 CALIFORNIA STREET, SUITE 500 SAN FRANCISCO, CA 94111-4624	50 CALIFORNIA STREET, SUITE 500 SAN FRANCISCO, CA 94111-4624

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
	1200 S PINE ISLAND ROAD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: PLANTATION FL
Zip / Country	Zip: 33324 / Country: USA

4. FEI Number: 94-3380425 ☐ 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
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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

FILE NOW!!! FEE IS $150.00
After May 1st 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PBC FELLOWS, JOHN A 50 CALIFORNIA ST, SUITE 500 SAN FRANCISCO, CA 94111	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DUTT, RONALD F 50 CALIFORNIA ST, SUITE 500 SAN FRANCISCO, CA 94111	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ROURE, WILLIAM J. 50 CALIFORNIA STREET, SUITE 500 SAN FRANCISCO, CA 94111	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRUIKSHANKS, GEOFF DE KEETLAAN 1, DIEGEM-MACHELEN BELGIUM, BRUSSELS 1831,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ROURE, WILLIAM J 50 CALIFORNIA ST, STE 500 SAN FRANCISCO, CA 94111	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CROOK, ROGER 50 CALIFORNIA ST., SUITE 500 SAN FRANCISCO, CA 94111	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S JON OLIN 1200 S PINE ISLAND ROAD PLANTATION FL 33324	☐ Change ☑ Addition

CR2E034 (10/02)

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 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: _____ 29 APR 03 954 6264296
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JON OLIN
SECRETARY