

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90289 022 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

90125879

DOCUMENT # F01000001437			
1. Entity Name DHL HOLDINGS (USA), INC.			
Principal Place of Business 50 CALIFORNIA STREET, SUITE 500 SAN FRANCISCO, CA 94111-4624		Mailing Address 50 CALIFORNIA STREET, SUITE 500 SAN FRANCISCO, CA 94111-4624	
2. Principal Place of Business		3. Mailing Address 1200 S. PINE ISLAND RD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State PLANTATION FL	
Zip	Country	Zip 33324	Country USA
4. FEI Number 94-3302567		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
☐ CHECK HERE IF MAKING CHANGES			
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent	
		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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when resigning.) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 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	VCFO ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	RONALD, F. DUTT	NAME	
STREET ADDRESS	50 CALIFORNIA STREET, SUITE 500	STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO, CA 94111	CITY-ST-ZIP	
TITLE	PCD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	FELLOWS, JOHN	NAME	
STREET ADDRESS	50 CALIFORNIA STREET, SUITE 500	STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO, CA 941114624	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SELLERS, GARY C	NAME	
STREET ADDRESS	50 CALIFORNIA STREET, SUITE 500	STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO, CA 94111	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CLARK, RANDALL T	NAME	
STREET ADDRESS	50 CALIFORNIA STREET, SUITE 500	STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO, CA 94111	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CORBETT, JEFFREY A	NAME	
STREET ADDRESS	50 CALIFORNIA STREET, SUITE 500	STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO, CA 941114624	CITY-ST-ZIP	
TITLE	VS ☒ Delete	TITLE	☐ Change ☒ Addition
NAME	ORME, JED T JR.	NAME	V/S JON OLIN
STREET ADDRESS	50 CALIFORNIA STREET, SUITE 500	STREET ADDRESS	1200 S. PINE ISLAND ROAD
CITY-ST-ZIP	SAN FRANCISCO, CA 941114624	CITY-ST-ZIP	PLANTATION FL 33324
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: _____		Date: 29 APR 2003 954 626 4296	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

JON OLIN
SECRETARY

CR2034 (10/02)