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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: TRANSFREIGHT INTERNATIONAL INC.
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
DANY GHANEM
(Name of Person)
(Firm/Company) 7225 NW 25 STREET #113
(Address) MIAMI FLORIDA 33122
(City/State and Zip code)
For further information concerning this matter, please call:
DANY GHANEM at (305) 463 5200
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & Certified Copy Certificate of Status & Certified Copy



ATTN: Marsha

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. TRANSFI	REIGHT	INTERNATI	ONAL INC	>						
words or abbre	viations of	ist include the wo like import in lar hip if not so cont	nguage as will	clearly in	idicate that it:	Y", "CORPOI is a corporation	EATION" instead of	OT A	-	
2. MARYLAN	ID USA	4		3	52-186 96	55				
	y under the	law of which it	is incorporated	1)		FEI number, i	f applicable	:)		
4. JULY	23rd	1993		5	PERPE"					
(Da	te of incor			· · ·		er corp. will ce	asc to exist	or "perpet	uai")	•
6			QUALIF							
(Date first trens	acted busin	ness in Florida, I (SEE S	f corporation I ECTIONS 60				insert "upo	n qualifica	tion.")	-
7. 18974 B	ONANZ	A WAY - GAI	THERSBU	IRG M	D 20879			55.		
			(Principal offi	ce addres	9)		, " =		3 MAY	
		(Current maili	ng addres	5)			SA.	2-2	
8. FREIGHT	FORWA	ARDING / AIF	RCRAFT P	ART S	ALES			ند ۱۳۰۰	P	
	(s) of corp	orstion authorize	d in home stat	e or count	ry to be carrie	d out in state	of Florida)		+	-
9. Name and st	rect addr	ess of Florida	registered as	gent: (P	O. Box of N	fail Drop Box	NOT ac	entable)	08	
Name:		GHANEM			· · · · · · · · · · · · · · · · · · ·		_	· · · · ·	•	
Office Address:	7225	NW 25 ST	SUITE 113	3			-			
	MIAMI				Florida	33122				
		(City)				(Zip code)	-			•
10. Registered : Having been na designated in the further agree to duties, and I am	med as re is applica comply w	gistered agent o tion, I hereby o with the provisio	ccept the ap ons of all stat	pointmet lutes rela	nt as register tive to the p	red agent and roper and co	i agree to mplete per	act in this	capac	ity. I

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

	ECTORS DANY GHANEM			
	3853 AL CANTARA AVE	<u> </u>		
Address:	MIAMI FL 33178			······································
Vice Chai	irman:		· · · · · · · · · · · · · · · · · · ·	······································
Address:			•	
Director:	HIAM GHANEM	· # 1	<u>-</u>	
	3853 AL CANTARA AVE		-	
	MIAMI FLORIDA 33178			
Director:				
		78	08 HA	
	ICERS DANY GHANEM	SSEE FLOR	1/-2 PH 4:0	
		,		<u></u>
	ident: HIAM GHANEM		·	
Address:	3853 AL CANTARA AVE MIAMI FLORIDA 33178	<u> </u>		
Secretary:				
Address:	<u></u>			·
Treasurer	HIAM GHANEM			· · · · · · · · · · · · · · · · · · ·
Address:		· · · · · ·	 ;	
	If necessary, you may attach anaddendum to the application listing additional officers and	or directo	ors.	
13	(Signature of Chairman, Wice Chairman, or any officer listed in number 12 of the ap	plication)	
14 D	ANY GHANEM / PRESIDENT		é	
	(Typed or printed name and capacity of person signing application)		*.	 .

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT TRANSFREIGHT INTERNATIONAL, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS APRIL 07, 2003.

Paul B. Anderson Charter Division

Paul B. Undan

