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Secretary of State
01-18-2005 90059 041 ***150.00

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2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F04000003285

1. Entity Name
CLEARFREIGHRT, INC.
S/B CLEARFREIGHT INC.

Principal Place of Business	Mailing Address
880 APOLLO STREET SUITE 101 EL SEGUNDO, CA 90245	880 APOLLO STREET SUITE 101 EL SEGUNDO, CA 90245

66006377

01052005 Chg-P CR2E034 (10/03)

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 95-3313403 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAGNAR, DALEN
9024 NW 12TH STREET
MIAMI, FL 33172

7. Name and Address of New Registered Agent

Name DAN SAVAGE
Street Address (P.O. Box Number is Not Acceptable) 9024 NW 12E STREET
City MIAMI FL Zip 33172

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 _____ 2/10/05
Signature, name or printed name of registered agent and title if applicable. Registered Agent signature required when addressing. DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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	P GO, KENJI 880 APOLLO STREET EL SEGUNDO, CA 90245 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WANG, MAX 880 APOLLO STREET EL SEGUNDO, CA 90245 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS REYNOLDS, DAVID 880 APOLLO STREET EL SEGUNDO, CA 90245 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT PORSE, PETER 880 APOLLO STREET EL SEGUNDO, CA 90245 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SO, DAVID 880 APOLLO ST EL SEGUNDO CA 90245 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 authority to do so.

SIGNATURE: Daryl von Gausau 1/10/05 310.726.0400 x 154
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED OFFICER OR DIRECTOR Date Daytime Phone #

MAX WANG