2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F43426

FILED Apr 16, 2004 Secretary of State

Entity Name: ADMIRAL INTERNATIONAL FREIGHT FORWARDERS, INC.

Current Principal Place of Business: New Principal Place of Business:

840 W 19 ST 7500 NW 69TH AVE.

HIALEAH, FL 33010 US BAY #7

MEDLEY, FL 33166 US

Current Mailing Address: New Mailing Address:

840 W 19 ST 7500 NW 69TH AVE.

HIALEAH, FL 33010 US BAY # 7

MEDLEY, FL 33166 US

FEI Number: 59-2206267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALVAREZ, IBIS

840 W 19 ST

HIALEAH EL 33010 LIS

ALVAREZ, IBIS

7500 NW 69TH AVE

BAY #7

HIALEAH, FL 33010 US BAY #7
MEDLEY, FL 33166 US

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: 04/16/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: ALVAREZ, IBIS, Name: ALVAREZ, IBIS,

Address: 840 W 19TH ST Address: 7500 NW 69TH AVE., BAY #7

City-St-Zip: HIEALEAH, FL 33010 City-St-Zip: MEDLEY, FL 33166

Title: ST () Delete Title: ST (X) Change () Addition Name: ALVAREZ, LUIS A. Name: ALVAREZ, LUIS A.

 Name:
 ALVAREZ, LUIS A,
 Name:
 ALVAREZ, LUIS A,

 Address:
 840 W 19TH ST
 Address:
 7500 NW 69TH AVE., BAY #7

City-St-Zip: HIEALEHA, FL 33010 City-St-Zip: MEDLEY, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IBIS ALVAREZ PD 04/16/2004