2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J14323

Name:

Address:

City-St-Zip:

Entity Name: GLOBAL FREIGHT SERVICES, INC.

FILED Apr 19, 2005 Secretary of State

Current Principal Place of Business: 3515 NW 114 AVE		New Principal Place of Business:		
MIAMI, FL				
Current Ma	ailing Address:	New Maili	New Mailing Address:	
3515 NW 1 MIAMI, FL				
FEI Number:	59-2677051 FEI Number Applied For () FEI Nu	ımber Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
RUBIO, RIC 13065 MIRA CORAL GA		TRUMBAC 3515 NW 1 MIAMI, FL		
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.				
SIGNATUR	RE: ANDREW TRUMBACH		04/19/2005	
Electronic Signature of Registered Agent Date				
Election Campaign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD () Delete RUBIO, RICARDO 13065 MIRANDA ST. CORAL GABLES, FL 33156	Title: Name: Address: City-St-Zip:	P,D (X) Change () Addition TRUMBACH, ANDREW 3515 NW 114 AVE MIAMI, FL 33178	
Title: Name: Address: City-St-Zip:	SD () Delete RUBIO, TAMARA 13065 MIRANDA ST. CORAL GABLES, FL 33156	Title: Name: Address: City-St-Zip:	VP,S (X) Change () Addition NASI, DINO 3515 NW 114 AVE MIAMI, FL 33178	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition AMARO, JORGE 3515 NW 114 AVE MIAMI, FL 33178	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition WILLIAMS, LEON 3515 NW 114 AVE MIAMI, FL 33178	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition MCRAE, ROBERT 3515 NW 114 AVE MIAMI, FL 33178	
Title:	() Delete	Title:	CIO () Change (X) Addition	

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.

Name:

Address:

City-St-Zip:

ESQUIVEL, DAVID

3515 NW 114 AVE

MIAMI, FL 33178

SIGNATURE: ANDREW TRUMBACH P 04/19/2005