FILED

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

SIGNATURE:

## Apr 25, 2003 8:00 am Secretary of State DOCUMENT # M61279 04-25-2003 90156 047 \*\*\*150.00 1. Entity Name AUTAIR FREIGHT SERVICES, INC. Mailing Address Principal Place of Business 7301 NW 34TH ST 7301 NW 34TH ST MIAMI FL 33122 MIAMI FL 33122 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0009168 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LOWENSTEIN, ELLIOT Street Address (P.O. Box Number is Not Acceptable) 2100 SALZEDO ST **STE 303** CORAL GABLES, FL 33134 City 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After∰ay 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Change ☐ Addition WILSON, STEPHEN GARY NAME NAME 25 ELIZABETH AVE. STREET ADDRESS STREET ADDRESS SURREY, ENGLAND CITY-ST-ZIP CITY-ST-ZIP TITLE SRVP ☐ Delete TITLE ☐ Change ☐ Addition NAME CARRILLO, TERESA NAME STREET ADDRESS 7301 NW 34 STREET STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change □ Addition WHITAKER, PAUL S NAME NAME STREET ADDRESS STREET ADDRESS 7301 NW 34 ST CITY-ST-ZIP **MIAMI FL 33122** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MONTENEGRO, N NAME STREET ADDRESS 7301 NW 34TH STREET STREET ADORESS CITY-ST-ZIP MIAMI FL 33122 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.