2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000076338

Entity Name
 FASTCARGO USA, INC.



FILED Apr 12, 2004 08:00 AM Secretary of State

Principal Place of Business

1448 NW 78 AVENUE MIAMI, FL 33126-1608 Mailing Address

1448 NW 78 AVENUE MIAMI, FL 33126-1608



04052004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1033117 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KADUR, JULIAN 16328 SW 103RD TERRACE MIAMI, FL 33196

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MIAMI, FL 33196			IN THIS SPACE		
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 conted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution	ncing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS GTTY-ST-ZIP	PSD KADUR, JULIAN 16328 SW 103RD TERRACE MIAMI, FL 33196				U00000110580 04/12/04-80089-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DA ROSA, CARLOS R 16328 SW 103RD TERRACE MIAMI, FL 33196				
ITTE NAME STREET ADDRESS CITY-ST-ZIP	TD KADUR, PETER 16328 SW 103RD TERRACE MIAMI, FL 33196			DO	NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME			1		

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 1 further certify that the information indicated on this report or supplemental reports to the 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 attailment with an address, with at other like empowered.

SIGNATURE:

STREET ADDRESS CITY - ST - ZIP

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytrne Phone