

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Apr 29, 2005 8:00 am
Secretary of State**

04-29-2005 90221 017 ***158.75

DOCUMENT # P01000005038

1. Entity Name
MAR Y AIRE CARGO INTERNACIONAL, INC.



Principal Place of Business
808 TWIN LAKES DRIVE
CORAL SPRINGS, FL 33071

Mailing Address

808 TWIN LAKES DRIVE
CORAL SPRINGS, FL 33071

2. Principal Place of Business

3. Mailing Address

4103 SAPPHIRE TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
WESTON, FL

City & State
WESTON, FL

04232005 Chg-P CR2E034 (10/03)

Zip
33331

Zip
33331

Country

4. FEI Number 65-1066994	Applied For Not Applicable
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5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HERRERA, CARLOS
808 TWIN LAKES DRIVE
CORAL SPRINGS, FL 33071

Name
CARLOS HERRERA

Street Address (P.O. Box Number is Not Acceptable)
4103 SAPPHIRE TERRACE

City
WESTON

FL
33331

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

(NOTE Registered Agent signature required when changing)

DATE

03/03/05

**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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PVTS
HERRERA, CARLOS
808 TWIN LAKES DRIVE
CORAL SPRINGS, FL 33071

Delete

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PVTS
HERRERA, CARLOS
4103 SAPPHIRE TERRACE
WESTON, FL. 33331

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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

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 all other like empowered.

SIGNATURE:

President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/03/05

Date

Daytime Phone #