FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91439 015 ***150.00

80113207

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000027943

1. Entity Name
XPRESS FREIGHT SERVICES, INC.

Principal Place of Business	Mailing Address
10125 NW 116TH WAY SUITE 16 MIAMI, FL 33178	10125 NW 116TH WAY SUITE 16 MIAMI, FL 33178

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
2550 N.W 72 AVE		2550 N.W 72 AVE.	
Suite, Apt. #, etc. SUITE 108		Suite, Apt. #, etc. SUITE 108	
City & State MIAMI FL		City & State MIAMI FL	
Zip 33122	Country U.S.A	Zip 33122	Country U.S.A.

4. FEI Number 65-1099918 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DE FREITAS, ANNETTE
10125 NW 116TH WAY SUITE 16
MIAMI, FL 33178

7. Name and Address of New Registered Agent

Name RICHARD TEIXEIRA
Street Address (P.O. Box Number Is Not Acceptable) 11551 SW 81 TERR
City MIAMI FL Zip Code 33173

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] 2/25/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☒ Delete	TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	DE FREITAS, ANNETTE		NAME	RICHARD TEIXEIRA	
STREET ADDRESS	14924 S.W. 142 PL		STREET ADDRESS	11551 SW 81 TERR	
CITY-ST-ZIP	MIAMI, FL 33186		CITY-ST-ZIP	MIAMI FL 33173	
TITLE	ST	☒ Delete	TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	RICHARD, TEIXEIRA		NAME	ANNETTE DE FREITAS	
STREET ADDRESS	11551 SW 81 TERRACE		STREET ADDRESS	14924 SW 142 PLACE	
CITY-ST-ZIP	MIAMI, FL 33173		CITY-ST-ZIP	MIAMI FL 33186	
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		
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.

SIGNATURE: [signature] 2/25/03 591-0033
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)