

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90179 005 ***158.75

DOCUMENT # P01000075029

1. Entity Name
AEROSERVICE CARGO EXPRESS, INC.



Principal Place of Business
8418 NW 70 STREET
MIAMI, FL 33166

Mailing Address
8418 NW 70 STREET
MIAMI, FL 33166

2. Principal Place of Business

3. Mailing Address

9615 FOUNTAINEBLEAU BLVD. 9615 FOUNTAINEBLEAU BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04212004

Chg-P

CH2E034 (10/03)

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-1125555

Applied For

Not Applicable

Zip

33172

Country

Zip

33172

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VELASQUEZ, PEDRO A
7585 S.W. 152 AVE.
MIAMI, FL 33193

Name

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

City

FL

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME VELASQUEZ, PEDRO A ☒ Delete
STREET ADDRESS 7585 S.W. 152 AVE.
CITY-ST-ZIP MIAMI, FL 33193

TITLE ST
NAME MARTINEZ, DORAL ☒ Delete
STREET ADDRESS 7585 S.W. 152 AVE.
CITY-ST-ZIP MIAMI, FL 33193

TITLE VP
NAME MARTINEZ, GUILLERMO L ☒ Delete
STREET ADDRESS 7585 S.W. 152 AVE.
CITY-ST-ZIP MIAMI, FL 33193

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME VELASQUEZ, PEDRO A
STREET ADDRESS 7545 SW 152 AVE UNIT D307
CITY-ST-ZIP MIAMI FL 33193

TITLE ST ☒ Change ☐ Addition
NAME MARTINEZ, DORA
STREET ADDRESS 7545 SW 152 AVE UNIT D307
CITY-ST-ZIP MIAMI FL 33193

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04-21/04 (305) 303-3450