2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 28, 2006 08:00 AM **Secretary of State** DOCUMENT # P01000076299 SHIPPING SOLUTIONS WORLDWIDE, INC. Principal Place of Business Mailing Address 14748 S.W. 56TH STREET 14748 S.W. 56TH STREET MIAMI, FL 33185 MIAMI, FL 33185 03222008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1126415 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BOSCAN, GISELA DO NOT WRITE 14748 S.W. 56TH STREET MIAMI, FL 33185 IN THIS SPACE 6. 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, typed or printed name of registered agent and title if applicable. DATE (NOTE Registered Agent signature required when reinstating) \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution Added to Fees 1/00/00/483003 10. OFFICERS AND DIRECTORS 04/11/06-80098-021 150.00 TITLE MAME BOSCAN, GISELA STREET ADDRESS 14748 S.W. 56TH STREET CITY-ST-ZIP MIAMI, FL 33185 TITLE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TELE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 807, 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TATLE 4(48*4*E STREET ADDRESS City-ST-702

ALLO DOSCAD F15010 NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/22/06

FILED