

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000110168

1. Entity Name

PANALPINA AMERICAS SERVICES, INC.



Principal Place of Business
3505 N.W. 107TH AVENUE
MIAMI FL 33152

Mailing Address
3505 N.W. 107TH AVENUE
MIAMI FL 33152

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip
33178-1889

Country

Zip
33178-1889

Country

FILED
03 AUG -5 AM 9:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 13-5349950

Applied For
Not Applicable

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 \$550.00

After September 10, 2003 Fee will be \$750.00

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 PD
NAME RYSER, CHRISTIAN
STREET ADDRESS 3505 NW 107TH AVE.
CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

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

TITLE T
NAME SIMON, BEAT
STREET ADDRESS 3505 NW 107TH AVE.
CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

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

TITLE S
NAME ZURCHER, WALTER
STREET ADDRESS 3505 NW 107TH AVE.
CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME LEE, STEVE
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME SIDLER, BRUNO
STREET ADDRESS VIADUKTSTRASSE 42
CITY-ST-ZIP 4002 BASEL, SWITZERLAND ☐ Delete

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

TITLE D
NAME BUETIKOFER, CHRISTOPHER
STREET ADDRESS VIADUKTSFTRASSE 42
CITY-ST-ZIP 4002 BASEL, SWITZERLAND ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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 an other like empowered.

SIGNATURE:

SIGNATURE REQUIRED Steve Lee

08/04/03

786-336-5078

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)