2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005
Secretary of State

DOCUMENT# P02000040153

Entity Name: TRANSHIP FREIGHT SERVICES, INC.

Current Principal Place of Business:

4723 NW 72 AVE
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

4723 NW 72 AVE
MIAMI, FL 33166

New Mailing Address:

FEI Number: 01-0669085 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BARNED, BERNICE
15235 SW 108 TER
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BARNED, ANDREW
Address: 15235 S.W. 108TH TERRACE
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete
Name: DURRANT, MARGUERITE
Address: 15235 S.W. 108TH TERRACE
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete
Name: POWELL, JENNIFER
Address: 15235 S.W. 108TH TERRACE
City-St-Zip: MIAMI, FL 33196

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: BARNED, ANGELLA P
Address: 15235 SW 108TH TERRACE
City-St-Zip: MIAMI, FL 33196

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW BARNED D 01/21/2005

Electronic Signature of Signing Officer or Director Date