

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000053414

FILED
May 12, 2008
Secretary of State**Entity Name:** FREIGHT MASTER OVERSEAS, INC**Current Principal Place of Business:**7220 NW 56TH ST., 1ST FLOOR
MIAMI, FL 33166**New Principal Place of Business:**8177 NW 56TH ST.
MIAMI, FL 33166**Current Mailing Address:**7220 NW 56TH ST., 1ST FLOOR
MIAMI, FL 33166**New Mailing Address:****FEI Number:** 73-1631255**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RAMERSAD, PREMCHAN
7220 NW 56TH ST., 1ST FLOOR
MIAMI, FL 33166 US**Name and Address of New Registered Agent:**RAMERSAD, PREMCHAN
8177 NW 67TH ST.
MIAMI, FL 33166 US

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:

05/12/2008

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: PD () Delete
Name: RAMPERSAD, PREMCHAN
Address: 11624 SW 169TH TERR.
City-St-Zip: MIAMI, FL 33157

Title: VD () Delete
Name: RAMPERSAD, SHAFFINA
Address: 11624 SW 169TH TERR.
City-St-Zip: MIAMI, FL 33157

Title: DM () Delete
Name: ETIENNE, STEVE R
Address: 10454 N.W. 6TH STREET
City-St-Zip: PEMBROKE PINE, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change () Addition
Name: ETIENNE, STEVE R
Address: 10454 N.W. 6TH STREET
City-St-Zip: PEMBROKE PINE, FL 33026

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SHAFFINA RAMPERSAD

VD

05/12/2008

Electronic Signature of Signing Officer or Director_____
Date