2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085829

Title:

Name:

Address: City-St-Zip:

Entity Name: ATLANTIC FREIGHT MCO, INC.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7270 WESTPOINTE BLVD #927 ORLANDO, FL 32835 **Current Mailing Address: New Mailing Address:** 1 SLATER DRIVE ELIZABETH, NJ 07206 FEI Number: 01-0741231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MYARA, JEFF PATTERSON, JEFF 7270 WESTPOINTE BLVD #927 7270 WESTPOINTE BLVD #927 ORLANDO, FL 32835 ORLANDO, FL 32835 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: JP 01/04/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HUMES, ROB Name: Name: 1 SLATER DRIVE Address: Address: City-St-Zip: ELIZABETH, NJ 07206 City-St-Zip: Title: Title: () Delete () Change () Addition BARTLEY, TOM Name: Name: Address: Address: 1 SLATER DR City-St-Zip: ELIZABETH, NJ 07206 City-St-Zip: Title: Title: () Delete () Change () Addition BARBARUOLO, PERRY Name: Name: 1 SLATER DR Address: Address: City-St-Zip: ELIZABETH, NJ 07206 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition MYARA, JEFF Name: Name: Address: 7270 WEST POINT BLVD #927 Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JP S 01/04/2008

() Delete

PATTERSON, JEFF

ELIZABETH, NJ 07206

1 SLATER DR

() Change () Addition