

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090836

FILED  
Aug 18, 2005  
Secretary of State

Entity Name: MUNDICARGO FORWARDING, INC.

**Current Principal Place of Business:**

400 N.W. 166TH AVENUE  
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

**Current Mailing Address:**

400 N.W. 166TH AVENUE  
PEMBROKE PINES, FL 33028

**New Mailing Address:**

FEI Number: 22-3873762

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RODRIGUEZ, MARTHA L  
400 N.W. 166TH AVENUE  
PEMBROKE PINES, FL 33028 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: RODRIGUEZ, MARTHA  
Address: 400 N.W. 166TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: V ( ) Delete  
Name: PARRA, CLAUDIA  
Address: 6315 BALMORAL TER.  
City-St-Zip: CLARKSTONE, MI 48346

Title: S ( ) Delete  
Name: PARRA, LEONARDO  
Address: 6315 BALMORAL TER.  
City-St-Zip: CLARKSTONE, MI 48346

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: P ( ) Change (X) Addition  
Name: RODRIGUEZ, ALVARO PRESIDE  
Address: 400 N.W. 166 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33028

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: ALVARO RODRIGUEZ

P

08/18/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date