2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000004837

City-St-Zip:

WEST PALM BEACH, FL 33404

Entity Name: FREIGHTSAVERS OF FLORIDA, INC

FILED Jul 06, 2006 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
4152 W BLUETTERON BLVD				1747 VAN BUREN STREET			
SUITE 127 WEST PALM BEACH, FL 33404				SUITE 1010 HOLLYWOOD, FL 33020			
Current Mailing Address:				New Mailing Address:			
4152 W BLUETTERON BLVD				1747 VAN BUREN STREET			
SUITE 127 WEST PALM BEACH, FL 33404				SUITE 1010 HOLLYWOOD, FL 33020			
·			EEI Nive				
rei Number:	: 20-0550991	FEI Number Applied For ()	FEINUI	nber Not Appi	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1551 FORI SUITE 300	SON, KEVIN F UM PLACE)-F LM BEACH, FI						
The above in the State	named entity : e of Florida.	submits this statement for the	purpose c	of changing i	ts registere	ed office or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:		ADDITION	IS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	MICHOLS, KEL 2340 TECUMS			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	KINAMAN, DAR 4152 W BLUET	Delete RYL TON BLVD, STE 127 EACH, FL 33404		Title: Name: Address: City-St-Zip:		(X) Change () Addition DARRYL UE HERON BLVD, STE 127 M BEACH, FL 33404	
Title: Name: Address:	WEBER, JON	Delete		Title: Name: Address:	S WEBER, JO 4152 W BL	(X) Change()Addition DN UE HERON BLVD, STE 127	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

WEST PALM BEACH, FL 33404

SIGNATURE: DARRYL KINGMAN VP 07/06/2006