## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000066516

Entity Name: EXPRESS FREIGHT & LOGISTICS, INC

FILED Jun 06, 2007 Secretary of State

Littly Nai	HE. EAFR	LSS FREIGHT & LOGIS	TICO, INC.					
Current Principal Place of Business:				New Principal Place of Business:				
12164 SW MIAMI, FL				12164 SW MIAMI, FL	126TH AVE 33186			
Current Mailing Address:				New Mailing Address:				
12164 SW MIAMI, FL				12164 SW 126TH AVE MIAMI, FL 33186				
FEI Number:	: 20-1003287	FEI Number Applied I	For ( ) FEI Nui	mber Not Appl	icable ( )	Certificate of Sta	atus Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
LUE, WAYNE 12164 SW 126 AVE MIAMI, FL 33186 US				LUE, WAYNE 12164 SW 126TH AVE MIAMI, FL 33186 US				
	named ent e of Florida.	ity submits this statemer	nt for the purpose o	of changing it	s registered	office or register	ed agent, or both,	
SIGNATUR	RE:				06/06/2007			
	Elect	ronic Signature of Regis	tered Agent			Date		
		193(2)(b), F.S., the corpora cing Trust Fund Contributio		the prior notice	е.			
	S AND DIR	_	(-)	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P LUE, WAYN 12164 SW MIAMI, FL	126 AVE		Title: Name: Address: City-St-Zip:	P () LUE, WAYNE 12164 SW 126 MIAMI, FL 33		ion	
Title: Name: Address: City-St-Zip:	ST SKYERS, V 15433 SW MIAMI, FL	141 ST.		Title: Name: Address: City-St-Zip:	(	) Change ()Additi	on	
Title: Name: Address: City-St-Zip:	V INNIS, FRIT 28066 SW MIAMI, FL	166 CT		Title: Name: Address: City-St-Zip:	(	) Change ( ) Additi	on	
Title: Name:	VP JOSEPHS,	(X) Delete GARY		Title: Name:	(	) Change ()Additi	on	

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.

Address:

City-St-Zip:

SIGNATURE: WAYNE LUE PRES 06/06/2007

14961 SW 46TH TERRACE

MIAMI, FL 33185

Address:

City-St-Zip: