

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097739

FILED
Jun 29, 2005
Secretary of State

Entity Name: MIA AIRLINE CARGO CONSORTIUM, INC.

Current Principal Place of Business:

6150 N.W. 17TH ST.
STE. 225
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 997990
MIAMI INT'L AIRPORT, FL 332997990

New Mailing Address:

FEI Number: 20-0609439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST.
STE. 1
TALLAHASSEE, FL 323011283 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: P () Delete
Name: RASNAVAD, MANSOUR
Address: 6150 N.W. 17TH ST., STE. 225
City-St-Zip: MIAMI, FL 33126

Title: VT () Delete
Name: AGOSTINO, DAN
Address: 6150 N.W. 17TH ST., STE. 225
City-St-Zip: MIAMI, FL 33126

Title: S () Delete
Name: MILHOMME, JEAN A
Address: 6150 N.W. 17TH ST., STE. 225
City-St-Zip: MIAMI, FL 33126

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:

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: MANSOUR RASNAVAD

P

06/29/2005

Electronic Signature of Signing Officer or Director

_____ Date