## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000143999

Name:

Address:

City-St-Zip:

ARIAS, AROLDO

MIAMI, FL 33172

210 NW 87TH AVE SUITE L-210

Entity Name: FREIGHT XXI CONTAINERS USA INC.

FILED Jun 06, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
210 NW 8 MIAMI, FL	7TH AVE SUITE 33172	E L-210			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
210 NW 8 MIAMI, FL	7TH AVE SUITE 33172	EL-210			
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
7270 NW MIAMI, FL The above	named entity s	SUITE 580	ourpose of changing its registered	d office or registered agent, or both,	
	e of Florida. 				
SIGNATU		c Signature of Registered Age	nt .	 Date	
Election Car		Trust Fund Contribution ( ).	511L	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I MOROS, HECTO 210 NW 87TH AV MIAMI, FL 3317	/E SUITE L-210	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () I DE ANGULO, IM 210 NW 87TH AV MIAMI, FL 3317	/E SUITE L-210	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	S ()I	Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: AROLDO ARIAS S 06/06/2005