2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jan 27, 2006
Secretary of State

DOCUMENT# P04000149969

Entity Name: FREIGHT MASTER EXPRESS, INC.

Current Principal Place of Business:

4249 13TH STREET
SAINT CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

4249 13TH STREET
SAINT CLOUD, FL 34769 US

New Mailing Address:

FEI Number: 20-1817251 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALVAREZ, LUIS
4249 13TH STREET
SAINT CLOUD, FL 34769 US

Name and Address of New Registered Agent:

ALVAREZ, LAZARO
4249 13TH STREET
SAINT CLOUD, FL 34769 US

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: LAZARO ALVAREZ 01/27/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALVAREZ, LUIS
Address: 4249 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: VP ( ) Delete
Name: ALVAREZ, LUIS
Address: 4249 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: T ( ) Delete
Name: ALVAREZ, LUIS
Address: 4249 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: S ( ) Delete
Name: ALVAREZ, LUIS
Address: 4249 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALVAREZ, LAZARO
Address: 4249 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: VP (X) Change ( ) Addition
Name: ALVAREZ, LAZARO
Address: 4249 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: T (X) Change ( ) Addition
Name: ALVAREZ, LAZARO
Address: 4249 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: S (X) Change ( ) Addition
Name: ALVAREZ, LAZARO
Address: 4249 13TH STREET
City-St-Zip: SAINT CLOUD, FL 34769 US

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.

SIGNATURE: LAZARO ALVAREZ P 01/27/2006
Electronic Signature of Signing Officer or Director Date