

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123646

FILED
Mar 24, 2009
Secretary of State

Entity Name: MIAMI TECH FREIGHT SERVICES, INC.

Current Principal Place of Business:

8460 NW 30TH TERR
MIAMI, FL 33166

New Principal Place of Business:

8460 NW 30TH TERR
DORAL, FL 33122

Current Mailing Address:

PO BOX 52-0676
MIAMI, FL 331520676

New Mailing Address:

PO BOX 52-0676
MIAMI, FL 331520676 US

FEI Number: 20-3445303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMERO, TOMAS
4788 NW 103RD CT
MIAMI, FL 33178 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROMERO, TOMAS
Address: 4788 NW 103RD CT
City-St-Zip: MIAMI, FL 33178

Title: VP () Delete
Name: RODRIGUEZ, AMASVIDO
Address: 3611 SW 138TH AVE
City-St-Zip: MIAMI, FL 33178

Title: TR () Delete
Name: CARRILLO, TERESA
Address: 5480 NW 175TH ST
City-St-Zip: MIAMI, FL 33055

Title: SEC () Delete
Name: MONTENEGRO, ROSA N
Address: 43 NW 108TH CT
City-St-Zip: MIAMI, FL 33172

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: TERESA CARRILLO

V.P.

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date