## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000065988

Name:

Address:

City-St-Zip:

PAOLINI, CARLOS E

MIAMI, FL 33194 US

1531 SW 153RD PATH

Entity Name: VENEAMERICAN CARGO EXPRESS, INC.

FILED Jan 28, 2009 Secretary of State

yu.		AMERICAN CANCO EXTREGO,			
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
9821 NW 8	30 AVE.		8999 NW 107 CT. 106		
HIALEAH, FL 33016 US			DORAL, FL 33178	US	
Current M	ailing Add	ress:	New Mailing Add	New Mailing Address:	
9821 NW 8	30 AVE.		8999 NW 107 CT.		
5-O HIALEAH,	FL 33016	US	106 DORAL, FL 33178	US	
FEI Number:	26-2969691	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address o	of Current Registered Agent:	Name and Addres	Name and Address of New Registered Agent:	
HARRAR, VANESSA 9821 NW 80 AVE. 5-O			HARRAR, VANES 8999 NW 107 CT. 106		
HIALEAH, FL 33016 US				DORAL, FL 33178 US	
The above in the State			purpose of changing its regist	ered office or registered agent, or both,	
SIGNATURE: VANESSA HARRAR				01/28/2009	
	Elect	tronic Signature of Registered Ag	ent	Date	
Election Car	npaign Finan	cing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D HARRAR, V 8999 NW 10 DORAL, FL	07TH COURT, APT # 106	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	1590 NW 1:	(X) Delete GUSTAVO A 28TH DRIVE, APT # 201 FL 33323 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title <sup>.</sup>	D	(X) Delete	Title <sup>.</sup>	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: VANESSA HARRAR D 01/28/2009