


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P09818 (6) 1. Corporation Name FRITZ AIR FREIGHT, INC.		



Principal Place of Business 706 MISSION STREET SUITE 1000 SAN FRANCISCO CA 94103	Mailing Address 706 MISSION STREET SUITE 1000 SAN FRANCISCO CA 94103
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 04/17/1986
24		29		4. FEI Number 75-1605156
25		30		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent GAZITUA, RALPH 2970 NW 75TH AVENUE MIAMI FL 33122		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

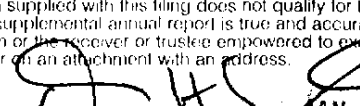
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRITZ, LYNN C.	1.2 NAME	
STREET ADDRESS	706 MISSION STREET SUITE 1000	1.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANDERSEN, CARSTEN S	2.2 NAME	
STREET ADDRESS	706 MISSION STREET SUITE 1000	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94103	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAYMOND, JAN H.	3.2 NAME	
STREET ADDRESS	706 MISSION STREET SUITE 1000	3.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94103	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHUNG, JOHN H	4.2 NAME	
STREET ADDRESS	706 MISSION STREET SUITE 1000	4.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94103	4.4 CITY-ST-ZIP	
TITLE	VPA	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES A. WEBSTER	5.2 NAME	
STREET ADDRESS	706 MISSION STREET SUITE 1000	5.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS DONAHUE	6.2 NAME	
STREET ADDRESS	706 MISSION STREET SUITE 1000	6.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE  VP/

CR2E034 (10/97)