


2004 FOR PROFIT CORPORATION ANNUAL REPORT

8/27/2004-90002-019-S115.00-S115.00

FILED
Sep 29, 2004 8:00 A.M.
Secretary of State

DOCUMENT # P09818 1. Entity Name UPS AIR FREIGHT SERVICES, INC.	
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Principal Place of Business 55 SECOND STREET SAN FRANCISCO, CA 94105	Mailing Address 55 SECOND STREET SAN FRANCISCO, CA 94105
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2. Principal Place of Business <i>12380 Morris Road</i>	3. Mailing Address <i>12380 Morris Road</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <i>Alpharette, GA</i>	City & State <i>Alpharette, GA</i>
Zip <i>30005</i>	Zip <i>30005</i>
Country <i>U.S.A.</i>	Country <i>U.S.A.</i>

4. FEI Number 75-1605156	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete
NAME	DAVIS, D. SCOTT
STREET ADDRESS	55 GLENLAKE PKWY E
CITY-ST-ZIP	ATLANTA, GA 30328
TITLE	D <input type="checkbox"/> Delete
NAME	ESKEW, MICHAEL L
STREET ADDRESS	55 GLENLAKE PKWY NE
CITY-ST-ZIP	ATLANTA, GA 30328
TITLE	AS <input checked="" type="checkbox"/> Delete
NAME	PINARD, JOCELYN L
STREET ADDRESS	55 SECOND STREET
CITY-ST-ZIP	SAN FRANCISCO, CA 94105
TITLE	AS <input checked="" type="checkbox"/> Delete
NAME	YANG, DANNY
STREET ADDRESS	55 SECOND STREET
CITY-ST-ZIP	SAN FRANCISCO, CA 94105
TITLE	AS <input type="checkbox"/> Delete
NAME	PICA, EUGENA
STREET ADDRESS	55 GLENLAKE PKWY
CITY-ST-ZIP	ATLANTA, GA 30328
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	MODEROW, JOSEPH R
STREET ADDRESS	55 GLENLAKE PKWY NE
CITY-ST-ZIP	ATLANTA, GA 30328

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DS VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<i>Allen E. Hill</i>
STREET ADDRESS	<i>55 Glenlake PKWY, NE</i>
CITY-ST-ZIP	<i>Atlanta, GA 30328</i>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jeffrey D. Fireston* _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #