2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

if changed, or on

Feb 27, 2006 08:00 AM Secretary of State DOCUMENT # P94000066212 QUICK FREIGHT USA, INC. Principal Place of Business Mailing Address 854 NW GUERDON ST LAKE CITY FL 32055 854 NW GUERDON ST LAKE CITY FL 32055 2. Principal Place of Business 3. Mailing Address Surle, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/05) 1st MOORE Applied For City & State City & State 4. FEI Number 59-3269885 Not Applical Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name F & L CORP. Street Address (P.O. Box Number is Not Acceptable) ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE FL 32202 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. DATE FILE NOW!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 \$5.00 May D. Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Adding TITLE BILE PD ☐ Delete NAME CORBITT, H C III NAME U00000450197 STREET ADDRESS STREET ADDRESS 854 NW GUERDON ST CITY-ST-ZIP 03/09/05-80086-001 150.09 CITY-ST-ZIP LAKE CITY FL 32055 Change Addis. ☐ Detete THE SD T)71 F NAME CORBITT, HELEEN L NAME STREET ADDRESS STREET ADDRESS 854 NW GUERDON ST CITY-ST-ZIP CITY-ST-ZIP LAKE CITY FL 32055 aree. (7) E ☐ Change [] Aririst. --- Detate NAME NAME STREET ADDRESS STREET ACCURESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete 117LE ☐ Change Addition. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Delete TRUE Arkfille NAME MAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete Сhange ☐ AddS TAILE NAME NAME STREET ACORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental moon is the currence and that my signature shall have the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath, that I am an officer or direction of the corporation or the receiver in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if made under cath in the same legal effect as if ma

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