

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000016294

Entity Name: ALLSTATES FREIGHT LINK, INC.

FILED  
Apr 11, 2008  
Secretary of State

## Current Principal Place of Business:

9050 PINES BLVD  
STE 335  
PEMBROKE PINES, FL 33024 US

## Current Mailing Address:

9050 PINES BLVD  
STE 335  
PEMBROKE PINES, FL 33024 US

FEI Number: 65-0573586

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LORA, RAUL  
3601 SW 144TH AVE  
MIRAMAR, FL 33027 US

## New Principal Place of Business:

3349 N UNIVERSITY DRIVE  
STE # 6  
HOLLYWOOD, FL 33024 US

## New Mailing Address:

3349 N UNIVERSITY DRIVE  
STE # 6  
HOLLYWOOD, FL 33024 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: PST ( ) Delete  
Name: LORA, JOSE  
Address: 9050 PINES BLVD., SUITE 335  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: V ( ) Delete  
Name: LORA, RAUL A.  
Address: 9050 PINES BLVD., SUITE 335  
City-St-Zip: PEMBROKE PINES, FL 33024

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: LORA, JOSE  
Address: 3349 N UNIVERSITY DRIVE, STE. 6  
City-St-Zip: HOLLYWOOD, FL 33024

Title: V (X) Change ( ) Addition  
Name: LORA, RAUL A.  
Address: 3349 N UNIVERSITY DRIVE, STE. 6  
City-St-Zip: HOLLYWOOD, FL 33024

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: JOSE A. LORA

PST

04/11/2008

Electronic Signature of Signing Officer or Director

Date