


2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 18, 2004 8:00 am
Secretary of State

03-18-2004 90058 001 ***300.00

DOCUMENT # P95000081269	
1. Entity Name FRACHT FWO INC.	

Principal Place of Business 1338 40 NW 78 AVENUE MIAMI, FL 33126	Mailing Address 8933 NW 23 St. #211 JAMAICA, NY 11434
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66406624



02192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0646369	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GELLMAN, ARNOLD R
2400 SOUTH DIXIE HWY.
SUITE 100
MIAMI, FL 33133-0000

DO NOT WRITE IN THIS SPACE

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
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GISLASON, REYNEIR 147-39 175TH STREET JAMAICA, NY 11434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOLLANDO, KATHLEEN A 61-03 78TH STREET MIDDLE VILLAGE, NY 11379
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Kathleen A. Holland Date: 2/26/04 Daytime Phone #: 718 553-7914