## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Feb 02, 2004 08:00 AM **Secretary of State** DOCUMENT # P96000083014 1. Entity Name ACCESS FREIGHT FORWARDERS, INC. Principal Place of Business Mailing Address 8220 NW 30TH TERRACE 8220 NW 30TH TERRACE MIAMI, FL 33122 MIAMI, FL 33122 CR2E034 (10/03) 01092004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0700363 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE LEAL, MARCELO V 925 88 STREET SURFSIDE, FL 33154 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) Signature, typed or printed name of registered agent and title if applicable, <del>U0000002439</del>7 02/02/04-80065-025 150.00 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. VSD TITLE NAME LEAL, MARCELO V 925 88 STREET STREET ADDRESS CITY-ST-ZIP SURFSIDE, FL 33154 TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CiTY-ST-ZIP TITLE 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)(1), 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MARRELO V. LEM

**FILED**