

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2003 8:00 am**  
**Secretary of State**

04-18-2003 90214 004 \*\*\*150.00

**DOCUMENT # P96000083838**

**1. Entity Name**  
**QUICK WORLD WIDE FREIGHT FORWARDERS, INC.**



**Principal Place of Business**  
**3370 SW 13 AVE**  
**FORT LAUDERDALE FL 33315**  
**US**

**Mailing Address**  
**P O BOX 21822**  
**FT. LAUDERDALE FL 33335**  
**US**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number** **65-0699143**

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**BRZOWSKI, CLARK**  
**16 ROYAL PALM WAY**  
**APT 201**  
**BOCA RATON FL 33432**

**7. Name and Address of New Registered Agent**

**Name** **Lon Hoehne**  
**Street Address (P.O. Box Number is Not Acceptable)** **3370 SW 13th Ave.**  
**City** **Fort Lauderdale** **FL** **Zip Code** **33315**

**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** *[Signature]* **Lon Hoehne, Pres/Dir** **DATE**

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE** **D** ☐ Delete  
**NAME** **HOEHNE, LON**  
**STREET ADDRESS** **4180 NW 10TH AVE**  
**CITY-ST-ZIP** **FT LAUDERDALE FL 33309**

**TITLE** **VP** ☒ Delete  
**NAME** **BRZOWSKI, CLARK**  
**STREET ADDRESS** **16 ROYAL PALM WAY APT #201**  
**CITY-ST-ZIP** **BOCA RATON FL 33432**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **PSTD** ☒ Change ☐ Addition  
**NAME** **HOEHNE, LON**  
**STREET ADDRESS** **3370 SW 13th Ave**  
**CITY-ST-ZIP** **Fort Lauderdale, FL 33315**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ 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:**

*[Signature]*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**4-14-03** **954-771-7292**

Date Daytime Phone #

CR2E034 (10/02)