

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90135 047 ***150.00

DOCUMENT # P97000005050

1. Entity Name
AAA INTERNATIONAL FREIGHT FORWARDING GROUP INC.

Principal Place of Business

**2057 NW 87TH AVE
 MIAMI FL 33172
 US**

Mailing Address

**2057 NW 87TH AVE
 MIAMI FL 33172
 US**



2. Principal Place of Business

**6709 NW 84AV
 Suite, Apt. #, etc.**

3. Mailing Address

**6709 NW 84AV
 Suite, Apt. #, etc.**

DO NOT WRITE IN THIS SPACE

City & State

MIAMI-FLORIDA

City & State

MIAMI-FLORIDA

4. FEI Number

65-0719878

Applied For

Not Applicable

Zip

33166

Country

USA

Zip

33166

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MELENDEZ, CARLOS
 2029 N.W. 87 AVE
 MIAMI FL 33172**

7. Name and Address of New Registered Agent

Name
SASCHA IBARRA
 Street Address (P.O. Box Number is Not Acceptable)
6709 NW 84AV
 City **MIAMI** FL Zip Code **33166**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PSTD** ☒ Delete
 NAME **IBARRA, SASCHA**
 STREET ADDRESS **2057 NW 87TH AVE.**
 CITY-ST-ZIP **MIAMI FL 33172**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☒ Change ☐ Addition
 NAME **IBARRA SASCHA**
 STREET ADDRESS **6709 NW 84AV**
 CITY-ST-ZIP **MIAMI-FL-33166**

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

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

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SASCHA IBARRA 01/14/02 305-5930300
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)