FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000022345

1. Corporation Name

FREIGHT EXPRESS INTERNATIONAL, INC.

Principal	Place	of	Busir	ness

Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90074 003 ***150.00



Dringing Diag	a of Business	Mailing Address		I I I I I I I I I I I I I I I I I I I
Principal Place		-		
2666 NW 112TH AVE 2666 NW 112TH AVE MIAMI FL 33172 MIAMI FL 33172				
		US		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				03/12/1997
	lace of Business 2-64 NW 112 AV	2a. Mailing Address	NW 112	4. FEI Number Applied For Not Applicable
21 2762		E. 26 2762 - 44 Suite, Apt. #, etc.	112	\$8.75 Additional
Suite, Apt.	#, etc.	⊢ ' ' ' '		5. Certificate of Status Desired Fee Required
22 City & Stat	<u> </u>	City & State		6. Election Campaign Financing S5.00 May Be
23 77 [9		28 MATIL F	7	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
$\frac{1}{24}$ 33/	72 25 USA	29 33172 30	ics A	Personal Property Tax. Yes No
	9. Name and Address of Curre	nt Registered Agent	041 5	10. Name and Address of New Registered Agent
ÇID I	OO MICHENI G		81 Name	
	OO, MICHEAL G		82 Street A	Address (P.O. Box Number is Not Acceptable)
	15 S.W. 141 COURT AI FL 33186		92	
MIM	MITL 00100		83	
			84 City	FL 85 Zip Code
		A CONTACTOR FILE CLASSICS AND A		corporation submits this statement for the purpose of changing its registered
office or r	enistered agent, or both, in the State	e of Florida. Such change was autho ations of, Section 607.0505, Florida	rizea by the corbo	ration's board of directors. I hereby accept the appointment as registered
SIGNATURE	4	MOTE: Pari	stered Agent signature re	quired when reinstating) DATE
42	Signature, typed or printed name of registered ag	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. TITLE	D	☐ DELETE	1.1 TITLE	P. T. S. D Change Addition
NAME	SIRJOO, MICHAEL		1.2 NAME	SIRTOR MICHAEL
STREET ADDRESS	10105 S.W. 141 COURT		1.3 STREET ADDRESS	10105 SW 141 COURT
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-ST-ZIP	MIAMI FL. 33 186
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	·		2.2 NAME	·
STREET ADDRESS].		2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	- Change Addition
NAME			3.2 NAME	
STREET ADDRESS	•		3.3 STREET ADDRESS	· ·
CITY-ST-ZIP	,		3.4, CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		i	4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	. Change Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME	. Change Addition
NAME	,		5.3 STREET ADDRESS	1
STREET ADDRESS	,		5.4 CITY-ST-ZIP	
CITY-ST-ZIP			6.1 TITLE	Change Addition
TITLE			6.2 NAME	change hadison
NAME			6.3 STREET ADDRESS	
STREET ADDRESS	il		0.5 STREET ADDRESS	

CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed 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 12 or Block 13 if changed 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 12 or Block 13 if changed 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 12 or Block 13 if changed the same legal effect as if made under oath; that I am an officer or director of the corporation of the CITY-ST-ZIP

SIGNATURE: