

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008059

FILED  
Jan 11, 2007  
Secretary of State

Entity Name: ABSOLUTE FREIGHT SERVICES, INC.

## Current Principal Place of Business:

6045 NW 87TH AVENUE  
MIAMI, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 52-4467  
MIAMI, FL 331524467

## New Mailing Address:

FEI Number: 65-0810388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOTO, LUIS A  
PO BOX 52-4467  
MIAMI, FL 33152 US

## Name and Address of New Registered Agent:

SOTO, LUIS A  
6045 NW 87 AVENUE  
MIAMI, FL 33178 US

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: LUIS A SOTO

01/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SOTO, LUIS A  
Address: PO BOX 52-4467  
City-St-Zip: MIAMI, FL 33152

Title: VP ( ) Delete  
Name: SOTO, JOSE L  
Address: PO BOX 52-4467  
City-St-Zip: MIAMI, FL 33152

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS A SOTO

P

01/11/2007

Electronic Signature of Signing Officer or Director

Date