2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# P98000008059

Entity Name: ABSOLUTE FREIGHT SERVICES, INC.

Current Principal Place of Business:

6045 NW 87TH AVENUE
MIAMI, FL 33178

New Principal Place of Business:

14799 PADDOCK DR
WELLINGTON, FL 33414

Current Mailing Address:

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

New Mailing Address:

PO BOX 52-4467
MIAMI, FL 33152

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
6045 NW 87 AVENUE
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

SOTO, LUIS A
14799 PADDOCK DR
WELLINGTON, FL 33414 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 04/01/2009
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 (X) 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 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 04/01/2009
Electronic Signature of Signing Officer or Director Date