

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000019022

FILED
Jul 17, 2007
Secretary of State

Entity Name: S.L.I. FREIGHT, INC.

Current Principal Place of Business:

5150 109TH AVENUE
SUITE 1
SUNRISE, FL 33351 US

New Principal Place of Business:

583 N. UNIVERSITY DRIVE
PLANTATION, FL 33324 US

Current Mailing Address:

5150 109TH AVENUE
SUITE 1
SUNRISE, FL 33351 US

New Mailing Address:

583 N. UNIVERSITY DRIVE
PLANTATION, FL 33324 US

FEI Number: 65-0817793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EL-HILA, RIADH
5150 109TH AVENUE
SUITE 1
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

EL-HILA, RIADH
583 N. UNIVERSITY DRIVE
PLANTATION, FL 33324 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: RIADH ELHILA

07/17/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EL-HILA, RIADH
Address: 5150 109TH AVENUE SUITE 1
City-St-Zip: SUNRISE, FL 33351

Title: S () Delete
Name: EL-HILA, KENIA
Address: 5150 109TH AVENUE SUITE 1
City-St-Zip: SUNRISE, FL 33351

Title: T () Delete
Name: BENSASI, SAMMY
Address: 5150 109TH AVENUE SUITE 1
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: EL-HILA, RIADH
Address: 583 N. UNIVERSITY DRIVE
City-St-Zip: PLANTATION, FL 33324

Title: MS (X) Change () Addition
Name: EL-HILA, KENIA
Address: 583 N. UNIVERSITY DRIVE
City-St-Zip: PLANTATION, FL 33324

Title: MR (X) Change () Addition
Name: BENSASI, SAMMY
Address: 583 N. UNIVERSITY DRIVE
City-St-Zip: PLANTATION, FL 33324

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: SAMMY BENSASI

MR

07/17/2007

Electronic Signature of Signing Officer or Director

Date