FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

## May 12, 2001 8:00 am DOCUMENT # P98000097749 Secretary of State UPS LOGISTICS GROUP AMERICAS, INC. 05-12-2001 90030 048 \*\*\*150.00 Principal Place of Business Mailing Address 55 GLENLAKE PKWY.. N.E. 55 GLENLAKE PKWY., N.E. ATLANTA GA 30328 ATLANTA GA 30328 00049303 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0880401 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. P, CEO, D CR2E034 (10/00) TITI F Delete Daniel P. Dimaggio 55 Glenlake Parknay NE Atlanta, GA 30328 NODINE, JAMES G NAME 8181 NW 14TH STREET SUITE 250 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33125 CITY-ST-ZIP SVP, CFÓ, T TITLE ☐ Delete TITLE Change NAME Douglas M. Anderson 55 Glenlake Parkesey NE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Atlanta, GA 30328 Addition ☐ Delete TITLE Change NAME NAME Allen E. Hill 55 Glenlake-Parkway NE STREET-ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Atlanta, GA 30328 Addition A Change TITLE TITLE Delete AT, AS NAME NAME Eugene 55 Glenlake Parkway DE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE TITLE ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition ☐ Delete TITLE Change NAME NAME STREET ADDRESS 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.