

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90033 045 ***150.00

DOCUMENT # P99000033780

1. Entity Name

Absolute Int'l. Freight Services, Inc.

Principal Place of Business

Mailing Address

412 Kelly Lane
 Weston, FL 33326

412 Kelly Lane
 Weston, FL 33326

2. Principal Place of Business
 3405-A N.W. 72nd Ave.

3. Mailing Address
 3405-A N.W. 72nd Ave.

Suite, Apt. #, etc.
 Suite 203

Suite, Apt. #, etc.
 Suite 203

City & State
 Miami, FL

City & State
 Miami, FL

Zip
 33122-1300

Country
 U.S.A.

Zip
 33122-1300

Country
 U.S.A.

4. FEI Number
 65-0912385

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Botero, Robert
 412 Kelly Lane
 Weston, FL 33326

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
 NAME D/P/S/T
 STREET ADDRESS Botero, Robert
 CITY - ST - ZIP 412 Kelly Lane
 Weston, FL 33326 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

TITLE
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 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

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TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

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TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

Robert Botero

04/601

305-593-6247

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #