

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000083177

FILED
Mar 20, 2005
Secretary of State

Entity Name: ARUBA CARIBBEAN CARGO, INC.

Current Principal Place of Business:

2057 NW 79 AVE
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

2057 NW 79 AVE
MIAMI, FL 33122

New Mailing Address:

FEI Number: 65-0950555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARENDS-DE CUBA, LYDIA
2057 NW 79 AVE
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

ARENDS, LYDIA
2057 NW 79 AVE
MIAMI, FL 33122 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: LYDIA ARENDS

03/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARENDS-DE CUBA, LYDIA
Address: 2057 NW 79 AVE
City-St-Zip: MIAMI, FL 33122

Title: V (X) Delete
Name: KOOLMAN, GIOVANNI
Address: 100 LAKE COVE CIRCLE
City-St-Zip: DAPHNE, AL 36526

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARENDS, LYDIA
Address: 2057 NW 79 AVE
City-St-Zip: MIAMI, FL 33122

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 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 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: LYDIA ARENDS

P

03/20/2005

Electronic Signature of Signing Officer or Director

Date