

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # S35207

1. Entity Name
AMERICAN ONE FREIGHT FORWARDERS, INC.



Principal Place of Business
10650 NW 29 TERRACE
MIAMI, FL 33172 US

Mailing Address
10650 NW 29 TERRACE
MIAMI, FL 33172 US

DO NOT WRITE IN THIS SPACE



04022004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0248385

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GARCIA, EDUARDO CPA
9231 SW 52ND TERR
MIAMI, FL 33165

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04-02-04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00.

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILLANUEVA, ROCIO 11343 NW 72ND TERR MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAMAS, HERNANDO 11343 NW 72ND TERR MIAMI, FL 33178
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04/05/04-80025-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rocio Villanueva

04-02-04

Date

305-5945725

Daytime Phone #