

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V03561

FILED
Apr 21, 2009
Secretary of State

Entity Name: COMBINED FORWARDING, INC.

Current Principal Place of Business:

1275 SAWGRASS CORP. PKWY
SUNRISE, FL 33323 US

New Principal Place of Business:

14700 HIGHLAND SPRINGS COURT
DAVIE, FL 33323 US

Current Mailing Address:

P.O. BOX 550486
FORT LAUDERDALE, FL 33355 US

New Mailing Address:

FEI Number: 65-0313010 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, CLIVE
14700 HIGHLAND SPRINGS CT
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SMITH, CLIVE
Address: 14700 HIGHLAND SPRINGS COURT
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: ANDHA, MOHAMMED
Address: 4835 NW 96 AVE
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, CLIVE N
Address: 14700 HIGHLAND SPRINGS COURT
City-St-Zip: DAVIE, FL 33323

Title: D (X) Change () Addition
Name: ANDHA, MOHAMMED H
Address: 4835 NW 96 AVE
City-St-Zip: SUNRISE, FL 33351

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: M ANDHA

D

04/21/2009

Electronic Signature of Signing Officer or Director

Date