

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S04186

Entity Name: MIAMI FREIGHT & SHIPPING COMPANY**Current Principal Place of Business:**10125 N.W. 116TH WAY, STE 6
MEDLEY, FL 33178**Current Mailing Address:**10125 N.W. 116TH WAY, STE 6
MEDLEY, FL 33178**FEI Number:** 59-1679158**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**STEWART AGENT SERVICES
2199 PONCE DE LEON BLVD.
301
CORAL GABLES, FL 33134 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	JOHNSTON, CHARLES H
Address	C/O 10125 NW 116 WAY, SUITE 6
City-State-Zip:	MEDLEY FL 33178

Title	D
Name	JOHNSTON, DAVID
Address	C/O 10125 NW 116 WAY, SUITE 6
City-State-Zip:	MEDLEY FL 33178

Title	D
Name	JOHNSTON, MAREK
Address	C/O 10125 NW 116 WAY, SUITE 6
City-State-Zip:	MEDLEY FL 33178

Title	D
Name	KENNEDY, MARJORY
Address	C/O 10125 NW 116 WAY, SUITE 6
City-State-Zip:	MEDLEY FL 33178

Title	S
Name	STINSON, LOUIS JR
Address	2199 PONCE DE LEON BLVD, #301
City-State-Zip:	MIAMI FL 33134

Title	VP
Name	KEENE, JULIANA
Address	C/O 10125 NW 116 WAY, SUITE 6
City-State-Zip:	MEDLEY FL 33178

I hereby 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 all other like empowered.

SIGNATURE: JULIANA KEENE

VICE PRESIDENT

01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date