FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPR	OVAL				
OMB Number:	3235- 0104				
Estimated average burden					
hours per response:	0.5				

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Persor     Gavrilovic Vladimir	2. Date of E Requiring S (Month/Day 07/31/202	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol  CHEETAH NET SUPPLY CHAIN SERVICE INC. [ CTNT ]					
(Last) (First) (Middle) 70 ELM STREET			Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)		
APT 1 (Street)			X Director Officer (give title below)	10% C Other below)	(specify	(Check Applica	Joint/Group Filing ble Line) ed by One Reporting	
NORTH NJ 07031 ARLINGTON							ed by More than One g Person	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
	Table I - Nor	ı-Derivativ	ve Securities Benefic	cially O	wned			
1. Title of Security (Instr. 4)	Table I - Nor	2	ve Securities Benefic 2. Amount of Securities Beneficially Owned (Instr. I)	3. Owner Form: E (D) or II (I) (Insti	ership Direct ndirect	4. Nature of Ind Ownership (Ins		
	Table II - D	2 E 4 Derivative	2. Amount of Securities Beneficially Owned (Instr.	3. Owner Form: E (D) or Ir (I) (Insti	ership Direct ndirect r. 5)	Ownership (Ins		
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**Explanation of Responses:** 

No securities are beneficially owned.

/s/ Gavrilovic Vladimir 08/30/2023

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.