

05-01-2002 91514 007 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F57836
 1. Entity Name
KANGURO EXPRESS, INC.

DO NOT WRITE IN THIS SPACE



92415

2. Principal Place of Business
3018 NW 79 Ave.
 Suite, Apt. #, etc.

3. Mailing Address
3018 NW 79 Ave.
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FL

City & State
Miami, FL

Zip
33122 Country
USA

Zip
33122 Country
USA

4. FEI Number
59-2149241

Applied For
 Not Applicable

8. Certificate of Status Desired **\$8.75 Additional Fee Required**

Register Agent:
VERAS, PEDRO M.
3018 NW 79TH AVENUE
MIAMI, FL 33122

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

9. 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 _____ DATE _____
(Signature, typed or printed name of registered agent and date of application. (NOTE: Registered Agent signature required when reissuing).)

10. This corporation is eligible to satisfy its filing requirements and elects to do so:

January 1 - May 1 Fee is \$100.00
After May 1, Fee is \$200.00
Attended UBR is \$85.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD Murmman, Roland 3018 NW 79 Ave., Miami, FL	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD Delfino, Alfredo 3018 NW 79 Ave., Miami, FL	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD Veras, Pedro M. 3018 NW 79 Ave., Miami, FL	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(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 11 or on an attachment with an address with all other persons empowered.

SIGNATURE: Pedro Veras **Pedro M. Veras** **4-17-02 (305) 4772723**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #