

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # F95000002799 1. Entity Name MORRISON EXPRESS CORPORATION (U.S.A.)	
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Principal Place of Business 2013 NW 84TH AVE MIAMI, FL 33122 US	Mailing Address 2000 HUGHES WAY EL SEGUNDO, CA 90245 US
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DO NOT WRITE IN THIS SPACE



01222007 No Chg-P CR2E034 (11/05)

4. FEI Number 95-3130076	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324

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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 re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	U000000618270 02/03/07-80023-006 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHIU, DANNY 2000 HUGHES WAY EL SEGUNDO, CA 90245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VOGT, STEFAN 2000 HUGHES WAY EL SEGUNDO, CA 90245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LIANG, JUDY 2000 HUGHES WAY EL SEGUNDO, CA 90245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHEN, KATHY 2000 HUGHES WAY EL SEGUNDO, CA 90245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHANG, PAUL 2000 HUGHES WAY EL SEGUNDO, CA 90245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCB MA, TONNY 2000 HUGHES WAY EL SEGUNDO, CA 90245

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Judy Liang JUDY LIANG/SECRETARY 1/23/07 310-322-8999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #