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**PROFIT** CORPORATION ANNUAL REPORT

1998

TITLE

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**  **FILED** 

Mar 02 1998 8:00am

Secretary of State

DOCUMENT # P94000078881 (7)

NEW WORLD EXPRESS CORPORATION

Principal Place of Business Mailing Address 169 E FLAGLER ST SUITE 1527 169 E FLAGLER ST SUITE 1527 MIAMI FL 33131 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/26/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0529492 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 Personal Property Tax due June 30. ☐ Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THOMPSON, DISNEY 169 E FLAGLER ST SUITE 1527 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33131 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 1.1 TITLE RODRIGUES, ANGELO CEZAR S NAME 1.2 NAME 169 E FLAGLER ST SUITE 1527 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33131** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE RODRIGUES, MARILENE U 2.2 NAME NAME STREET ADDRESS 169 E FLAGLER ST SUITE 1527 2.3 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33131** 2. 4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 City - ST- 7IP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE

14. Thereby certify that the information supplied with this filting closs not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

\*\*CEZAR S RODRIGUES\*\*

\*\*RODRIGUES\*\*

\*\*ODRIGUES\*\*

6.2 NAME

6.3 STREET ADDRESS 6.4 OFTY-ST-ZIP