FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000042003 (0)

M.R.H. EXPRESS, INC.

2. Principal Place of Business

Suite, Apt #, etc.

SIGNATURE:

City & State

22

Principal Place of Business	Mailing Address	
1820 S.W. 17TH ST.	1820 S.W. 17TH ST. MIAMI FL 33145	
MIAMI FL 33145	M/AMI PL 33193	

2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Mar 16 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

308 860 9868

Not Applicable

3. Date Incorporated or Qualified 05/30/1995

65-0587254

6. Certificate of Status Desired

4. FEI Number

City & State City & State		City & State)		6. Election Campaign Financing \$5.00 May Be	
3 28				Trust Fund Contribution Added to Fees		
Zip	Country	7 ip	Country	,	8. This corporation owes or has paid the current year Intangible	
24	24 25 29 30		30	Personal Property Tax due June 30. 🔀 Yes 🔲 No		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
VIL	Lasante, Robert eso		81	Name		
44 WEST FLAGLER STREET			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)	
SUITE 1700						
MIAMI FL 33130			83			
			84	City	- 85 Zip Code	
					FL (%)	
11. Pursuant to the provisions of Sections 607.05:02 and 607.15:08, 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. Fam familiar with, and accept the obligations of, Section 607.05:05, Florida Statutes.						
SIGNATURE Signature, typed or prime if more of registrated injurit and bits of applicable (NOTE Registered Agent signature required when relinstating) DATE						
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Po	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	HERNANDEZ, ORTELIO M		1.2 NAME			
STREET ADDRESS	1820 SW 17TH STREET		1.3 STAFE F	AODRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY - S	IT- ZIP	<u> </u>	
TITLE	VP	☐ DELETE	2 1 TITLE		☐ Change ☐ Addition	
NAME	HERNANDEZ, MIRNA R		2.2 NAME	Į		
STREET ADDRESS	1820 SW 17TH STREET		2.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL		2 4 CITY-	S1 - ZIP		
TITLE		☐ DELETE	3.1 FITLE		☐ Change ☐ Addition	
NAME			3 2 NAME		İ	
STREET ADDRESS			3 3 STREET	ADDRESS	j	
CITY-ST-ZIP			3.4. CITY - 5	ST-ZIP		
TITLE		☐ DELETE	4 1 TITLE		☐ Change ☐ Addition	
NAME (4. 2 NAME	į.		
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			44 CITY-S	T-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S	T-ZIP		
TITLE		☐ DELF TE	6 1 TITLE	Γ	☐ Change ☐ Addition	
NAME			6 2 NAME	1	ł	
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			64 CITY-S	T-ZIP		
14. Thereby certify that the information supplied with this filing does 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 supplied ental annual report is true and accurate another my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trusted empowers in executed his report as required by Chapter 607, Florida Statutes; and that my name appears in						