

2002 **FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90430 034 ***150.00

DOCUMENT # P98000082832 ✓
1. Entity Name
KENDALL EXPRESS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 11230 SW 137th AVENUE Suite, Apt. #, etc.		3. Mailing Address 7628 SW 117th AVENUE Suite, Apt. #, etc.	
City & State MIAMI FLORIDA	City & State MIAMI FLORIDA	4. FEI Number 65-0875906	Applied For <input type="checkbox"/> Not Applicable
Zip 33186	Country	Zip 33183	Country

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name
MAZEN LEWIS
Street Address (P.O. Box Number is Not Acceptable)
7628 SW 117th AVE
City
MIAMI FL Zip Code
33183

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.
SIGNATURE: *Mazen Lewis* **MAZEN LEWIS** DATE: 4/18/02
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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-ST-ZIP	ST-V MAZEN, LEWIS 7628 SW 117 AVENUE MIAMI FL 33183	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP MAHER LEWIS 7628 SW 117 AVENUE MIAMI FL 33183	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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13. I hereby 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 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 like empowered.
SIGNATURE: *Mazen Lewis* **MAZEN LEWIS** Date: 4/18/02 Daytime Phone #: 305 274 2263
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)