

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000034777

FILED
Apr 27, 2007
Secretary of State

Entity Name: CONEXPRESS INC.

Current Principal Place of Business:

10831 NW 29 ST
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD.
STE. 1050
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0912801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA INC.
2121 PONCE DE LEON BLVD,
STE. 1050
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: FARATRO, ANTONIO
Address: 15429 SW 36 TERRACE
City-St-Zip: MIAMI, FL 33185

Title: SVD () Delete
Name: FARATRO, JONNY
Address: 10831 NW 29 ST
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONIO FARATRO

PTD

04/27/2007

Electronic Signature of Signing Officer or Director

_____ Date