FILED
Apr 25, 2003 8:00 am
Secretary of State
04-25-2003 90243 042 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000094351

1. Entity Name
B XPRESS COMMODITIES, INC.

11017108

Principal Place of Business	Mailing Address
7891 W. FLAGLER ST. #155 MIAMI, FL 33144 US	7891 W. FLAGLER ST #155 MIAMI, FL 33144 US

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0549843 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PRESTON, MARJORIE G 8606 SW 156TH PL MIAMI, FL 33193	Name: Stella Echeverry Street Address (P.O. Box Number is Not Acceptable): 7891 W. Flagler St. # 155 City: Miami FL Zip Code: 33144

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: Stella Echeverry [signature] 4/18/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PRESTON, MARJORIE J 8606 SW 156TH PL MIAMI, FL 33193	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Stella Echeverry 8401 SW 43 St. Miami, FL 33155	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BETANCOURT, MARTHA L 2055 S.W. 122ND AVE., #235 MIAMI, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BUZZACCAI, JORGE E 12683 N.W. 9TH WAY MIAMI, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Manuel Salazar 7181 SW 42 Terrace Miami, FL 33155	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Manuel Salazar 4/18/03 (305)266-2424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #