


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

FILED
May 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 519744 (7) 1. Corporation Name MONARCH DELIVERY SERVICE, INC.			
Principal Place of Business 300 ROCHESTER BLDG / 8390 NW 53RD ST / MIAMI FL 33166		Mailing Address 300 ROCHESTER BLDG / 8390 NW 53RD ST / MIAMI FL 33166	
2. Principal Place of Business 21 4063 NW 79 Avenue Suite, Apt. #, etc. 22 City & State 23 Miami, FL Zip 24 33166		2a. Mailing Address 26 4063 NW 79 Avenue Suite, Apt. #, etc. 27 City & State 28 Miami, FL Zip 29 33166	
Country 25 USA		Country 30 USA	
9. Name and Address of Current Registered Agent AUSTIN, RICHARD B. ** 300 ROCHESTER BLDG. 8390 NW 53RD ST MIAMI FL 33166		10. Name and Address of New Registered Agent 81 Name Gail A. Nichols 82 Street Address (P.O. Box Number is Not Acceptable) 4063 NW 79 Avenue 83 84 City Miami, FL 85 Zip Code 33166	
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 <i>Gail A. Nichols</i> Gail A. Nichols 04/02/98 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE VP <input type="checkbox"/> DELETE NAME NICHOLS, GAIL A. STREET ADDRESS 7835 NW 148TH STREET CITY-ST-ZIP MIAMI FL		1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE D <input checked="" type="checkbox"/> DELETE NAME AUSTIN, RICHARD B STREET ADDRESS 8390 NW 53RD ST / 300 CITY-ST-ZIP MIAMI FL /		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE VPD <input type="checkbox"/> DELETE NAME MATTHEWS, RICHARD T JR STREET ADDRESS 7835 NW 148TH ST CITY-ST-ZIP MIAMI FL		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/07/1976	
4. FEI Number 59-1727273	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

14. 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 annual report or supplemental 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:

Gail A. Nichols

305-592-1445

CR2E034 (10/97)