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

PROFIT CORPORATION ANNUAL REPORT

1. Corporation Name

DOCUMENT # H19468



FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

Secretary of State 1999

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90215 041 ***150.00

PARCEL	SHIPPING	CENTER, INC.										
Principal Plac	e of Business	<u>-</u>	Mailing Addre	 ess					tan ayan ah	il B ibli Bibli	615 11 316 11 (331	
12062 S.W. 117 MIAMI FL 33180	TH COURT	12062 S.W. 117TH COURT MIAMI FL 33186					DO NOT WRITE	INI THIS (PDACE			
								3. Date Incorporated or Qualifed	IN THIS	SPACE		7
								09/04/1984				İ
2. Principal P	Place of Busines	is	2a. Mailing A	ddress		_		4. FEi Number		TA	pplied For	7
21			26					59-2447957		I N	ot Applicable	1
Suite, Apt.	#, etc	Suite, Ap	Suite, Apt. #, etc.					\$8.75 Additional Fee Required				
City & Stat	te	City & St	City & State				6. Election Campaign Financing		\$5.00	May Be	7	
23			28					Trust Fund Contribution	<u> </u>	Added	to Fees	4
Zip 24	25	Country	Zip 29		Coun 30	itry		 This corporation owes the current Personal Property Tax. 		☐Yes	□M ₀	}
	9. Name ar	nd Address of Curren	t Registered Age	nt				10. Name and Address of New Re	gistered A	gent		-
RIAL	REZ, MARTHA)'	81	Name					}
						Street Add	ress (P.O. Box Number is Not Acceptable	e)			٦	
12062 SW 117TH COURT MIAMI FL 33186												-{
1110-0					}'	83						
					1	84	City		FL	1 (Code	
office or r	registered agen	ns of Sections 607.050; t, or both, in the State of and accept the obligat	of Florida. Such ct	hange was au	thorized	by t	the corporati	poration submits this statement for the puon's board of directors. I hereby accept to	irpose of o he appoin	hanging it	s registered egistered	
SIGNATURE												
	Signature, typed or	printed name of registered agen		(NOTE:		igent	signature require	ed when reinstating)	DATE		000 111 40	-
12.	DP	OFFICERS AN		DELETE	13.			ADDITIONS/CHANGES TO OFFICE	CERS AND	☐ Change	ORS IN 12 ☐ Addition	7
TITLE	JUAREZ, MA	NDTUA		J DECELE	1.2 NAM		ļ			ري پرسوري		9
NAME		117TH COURT		· ·			ADDRESS					l
STREET ADDRESS	MIAMI FL	33186			1.4 C(T)		1					İ
CITY-ST-ZIP	MIL III	20100		DELETE	2.1 TITL		-23			☐ Change	☐ Addition	7
NAME	}			_	2.2 NAM		ļ					
STREET ADDRESS					2.3 STR	EET /	ADDRESS					}
CITY-ST-ZIP	1				2.4 CIT			-	-		-	-
TITLE] DELETE	3.1 TITL	E				☐ Change	Addition	7
NAME	}				3.2 NAM	Æ				•		
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NAME)				4.2 NA	ME	Į					1,
STREET ADDRESS			,		4.3 STR	EET,	ADDRESS					ľ
CITY-ST-ZIP	<u> </u>			7-01	4.4 CITY		ZIP				- A 4496-	4.
TITLE			L] DELETE	5.1 TITL		1			Change	☐ Addition	1
NAME	F		•	* *	5.2 NAM		*	•				
STREET ADDRESS							ADDRESS (
CITY-ST-ZIP				DELETE	5.4 CITS 6.1 TITL		-21)*			Change	Addition	d)
TITLE			L.	7 NETE 15	6.2 NAM					□ cualige	C) Worldoo	`}
NAME					0.2 NAV	nc	4DDDECC					-

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

305-251-246