2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

DOCUMENT # H29651 Jan 22, 2007 08:00 AM **Secretary of State** EXPRESS FINANCIAL CORP. Principal Place of Business Mailing Address 1515 NORTH FEDERAL HIGHWAY 1515 NORTH FEDERAL HIGHWAY SUITE 107 BOCA RATON FL 33432 SUITE 107 **BOCA RATON FL 33432** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Numbor 59-2467691 Not Applicable Zıp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BANNER, SIDNEY Street Address (P.O. Box Number is Not Acceptable) 1515 NORTH FEDERAL HIGHWAY SUITE 107 **BOCA RATON FL 33432** City Zìp Code 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 Signatura, typed or printed name of registered agent and tiffuir applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PS TITLE ■ Addition Delete Ulti Change BANNER, ROBERT A NAME NAME U000000596213 STE 107 1515 N FED HWY STAILL ADDRESS STREET ADDRESS 01/23/07-80071-003 158.75 **BOCA RATON FL 33432** CHY-ST-ZIP CITY-ST-7IP DIFE Change ☐ Delete Addition 1011 BANNER, SIDNEY NAMI NAME STREET 107 1515 N FED HWY STREET ADDRESS STREET ADORESS **BOCA RATON FL 33432** CHY-S1-ZIP CITY-SI-ZIP IIIII. ☐ Defete MILE Change Addition NAMI NAME STREET ADDRESS STREET ADDRESS CHY-ST-7P CITY-SI-ZIP ШЦ ☐ Delete HILE Change Addition NAME NAMI. STREET AODRESS STREET ADDRESS CDY-ST-ZIP CHY-ST-ZIP ☐ Delete Change Addition NAME STREET ADDRESS STRUCT ADDRESS CITY-ST-7IP CHY-SI-ZIP DITE Delete THE Change ☐ Addition NAMI NAME STREET LANDRESS STRUET ADDRESS CITY-ST-ZIP CHY-SI-ZIP I horoby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 offect as if made under eath; that I am an officer or director of the corporation or the receiver of the section of the receiver of the receiver of the section of the receiver of the section of the receiver of the section of the receiver of t

ROBERT A. BANNER 1/18/07

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