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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J03409**

GENERAL EXPRESS MANAGEMENT CORPORATION

FILED Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90036 009 ***150.00



Principal Place	of Business	Mailing Address	5						
7950 NW 14TH S	STREET	P.O. BOX 65-0854			·				
MIAMI FL 33126		MIAMI FL 33265-0854				DO NOT WRITE IN T	HIS SPACE		
						3. Date incorporated or Qualifed			
						1		ì	
						03/10/1986 4. FEI Number	lied For	w:	
Principal Place of Business Address Address						· · · · · · · · · · · · · · · · · · ·	 	Applicable	を行行
						59-2654878	\$8.75 A	dditional	1
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	Fee Red			
27						\$5.00			
City & State City & State			е			6. Election Campaign Financing	Added to		
23 28						Trust Fund Contribution			
Zip Country Zip				Country	<i>†</i>	8. This corporation owes the current year Intangible			
24 25		29 30				Personal Property Tax.			
	9. Name and Address of Cu	rrent Registered Agent	<u>t </u>	- 04	1 11	10. Name and Address of New Registo			
		• • •		81					
CARROLL, GABRIEL				82 Street Address (P.O. Box Number is Not Acceptable)					
1111	0 SW 36TH ST						<u>ंबर्टिके सन्ते । वर्ष</u>		
MIAN	AI FL 33122			83	3	· · · · · · · · · · · · · · · · · · ·		月間 題 1	
				84	City		85\ Zip C	ode	
				1	1	·	- L.		
At Discount	to the provisions of Sections 607	0502 and 607,1508, Flo	orida Statutes,	he abov	/e-named co	orporation submits this statement for the purposition's board of directors. I hereby accept the a	e of changing its	registered	
office or r	egistered agent, or both, in the Si	tate of Florida. Such cha	ange was autho	rized by	the corpora	orporation submits this statement for the purpose ation's board of directors. I hereby accept the a	ppolitiment as re-	JISIE TOO	
agent. I a	egistered agent, or both, in the Si m familiar with, and accept the ob	oligations of, Section ou	7.0303, Florida	Statute	J .		• •		
SIGNATURE	Signature, typed or printed name of registered	d seemt and title if applicable	(NOTE: Rec	istered Age	ent signature requ	uired when reinstating) . DAT			æ
	Signature, typed or printed name or registered	S AND DIRECTORS	,	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12	(11/98)
12.			DELETE	1.1 TITLE		NO 01 04878	☐ Change	Addition }	
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STREET ADDRESS	!						_		ğ
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NAME					ì				
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NAME	·			3.2 NAME	-				
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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.

SIGNATURE: