

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPART
Sandra B.
Secretary
DIVISION OF CC

OCEA321 331260277 1795 01/17/96
NOTIFY SENDER OF NEW ADDRESS
: OCEAN EXPRESS SRVS
16969 NW 67TH AVE STE 208
HIALEAH FL 33015-4214

DOCUMENT # K21692 (4)

1. Corporation Name

OCEAN-EXPRESS SERVICES, INC.

Principal Place of Business

8321 NW 12TH ST.
MIAMI FL 33126

Mailing Address

8321 NW 12TH ST.
MIAMI FL 33126

2. Principal Place of Business

21 16969 NW 67 AVE

Suite, Apt. #, etc. # 208

22 City & State HIALEAH FL

23 Zip 33015 Country USA

24 33015 25 USA

2a. Mailing Address

26 16969 NW 67 AVE

Suite, Apt. #, etc. # 208

27 City & State HIALEAH FL

28 Zip 33015 Country USA

29 33015 30 USA

3. Date Incorporated or Qualified

04/22/1988

3a. Date of Last Report

01/25/1995

4. FEI Number

65-0054239

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

EAGAN, ALAN
8321 NW 12TH ST.
SUITE 309
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name

EGAN, ALAN

82 Street Address (P.O. Box Number is Not Acceptable)

16969 N.W. 67 AVENUE # 208

83

84 City

HIALEAH

FL

85 Zip Code

33015

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

(Signature of Registered Agent)

ALAN EGAN, PRESIDENT

1/24/96

(NOTE: Registered Agent signature required when reappointing)

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE PS ☐ DELETE

NAME EGAN, ALAN
STREET ADDRESS 2120 NE 211 TERRACE
CITY-ST-ZIP MIAMI FL

1.2 TITLE TVP ☐ DELETE

NAME EGAN, JULIA
STREET ADDRESS 2120 NE 211 TERRACE
CITY-ST-ZIP MIAMI FL

1.3 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

(Signature and Typed or Printed Name of Signing Officer or Director)

ALAN EGAN

1/24/96

305.558.0335

CR2E034 (12/95)