FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K41590 (6)

1. Corporation Name

SOUTH FLORIDA COURIER SERVICES, INC.

Principal Place of Business	Mailing Address
5521 N.W. 82 AVENUE MIAMI FL 33166 US	5521 N.W. 82 AVENUE MIAMI FL 33166 US

3. Date Incorporated or Qualified: 10/24/1988
3a. Date of Last Report: 05/01/1995
4. FEI Number: 65-0082476 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

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

GARCIA-VIDAL, RAOUL ESQ
ONE ALHAMBRA PLAZA
SUITE 1450
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1 TITLE	DP	☒ Change ☐ Addition
NAME	GRANA, JOSE R.		1.2 NAME	GRANA, JOSE R.	
STREET ADDRESS	840 SW 94 AVE		1.3 STREET ADDRESS	7045 SW 95 CT.	
CITY-ST-ZIP	MIAMI FL 33174		1.4 CITY-ST-ZIP	MIAMI FL. 33173	
TITLE	DV	☐ DELETE	2 TITLE	DVS	☒ Change ☐ Addition
NAME	BRAVO, PAUL A		2.2 NAME	BRAVO, Paul A	
STREET ADDRESS	4728 S.W. 143 AVENUE		2.3 STREET ADDRESS	11580 SW 96 TER	
CITY-ST-ZIP	MIAMI FL 33175		2.4 CITY-ST-ZIP	Miami Fla 33176	
TITLE	S	☒ DELETE	3 TITLE		☐ Change ☐ Addition
NAME	BRAVO, HUBERTINA		3.2 NAME		
STREET ADDRESS	5121 GRANDA BLVD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLE FL 33146		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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: Jose R. Grana 1/23/96 (305) 477-2244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

CR2E034 (12/95)