

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 30, 2002 8:00 am
Secretary of State

07-30-2002 90376 024 ***150.00

DOCUMENT # K63160

1. Entity Name

M.C.U. Express, Inc. ✓

DO NOT WRITE IN THIS SPACE

123025

2. Principal Place of Business

2723 Center Court Drive

3. Mailing Address

2723 Center Court Drive

Suite, Apt. #, etc.

F8

Suite, Apt. #, etc.

F8

City & State

Weston, FL

City & State

Weston, FL

4. FEI Number

65-0137324

Applied For

Not Applicable

Zip

33332

Country

USA

Zip

33332

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PST Epstein, Diane
2723 Center Court Drive, Weston, FL 33332

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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TITLE
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STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-888-9976

CR2E034B (12/01)

Wachover +
 Division Contacts 123025
 address phone SanBiz.org

Dunn
 P.O. 6327 Tallahassee online peaches

2001 UNIFORM BUSINESS REPORT (UBR) FL

FILED (corp.)

DOCUMENT # K63160

33314 Mar 08, 2001 8:00 am

1. Entity Name

M.C.U. EXPRESS, INC.

Secretary of State

03-08-2001 90014 015 ***150.00

attn
Annual
Report Home page

Searched by
name list

Principal Place of Business

 13769 NW 19 ST
 PEMBROKE PINES FL 33028
 US

Mailing Address

 13769 NW 19 ST
 PEMBROKE PINES FL 33028
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0137324

☐ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

 5. Certificate of Status Desired ☐ \$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

 EPSTEIN, DIANE
 13769 NW 19 ST
 PEMBROKE PINES FL 33028

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip 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.

SIGNATURE

Signature, typed or printed name of registered agent and use if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

 9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐
FILE NOW!!! FEE IS \$160.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

 10. Election Campaign Financing
 Trust Fund Contribution. ☐ \$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

 TITLE PST ☐ Delete
 NAME EPSTEIN, DIANE
 STREET ADDRESS 13769 NW 19 ST
 CITY - ST - ZIP PEMBROKE PINES FL 33028

 TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

 TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

 TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

 TITLE ☐ Change ☐ Addition
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Attachment FEI Number
65-0137324

#K63160
July 22, 02
123025

Dear Department of State;

My name is Diane Epstein. My husband died May 5th and I buried him May 7th.

I had no idea that every year I have to pay \$150 to the state.

I first found a copy & spoke to my accountant (Gary Teperman) and he explain it to me.

I have moved to a smaller place. My new address is

(MCU Express)
Western Express

2723 Center Court Drive (F8)
Weston, FL 33332

954-888-9976

Also, my husband Robert used to take care of all my paperwork.

Please put this in consideration

Thank you
D Epstein