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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L11405

(2)

Mailing Address

SERVICOURIER, INC.

Principal Place of Business

SIGNATURE:

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Mar 03 1997 8:00am
Secretary of State

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| % Guillermo<br>9395 N. W. 13<br>Miami Fl 331 |                                                                                                                                 | % Guillermo estuari<br>9395 n. w. 19th Stree<br>Miami Fl 33172-2807 |                             | IAL           |                   | Date Incorporated or Qualified                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 3a Dat        | te of Last Re     | eport                                    |
|----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------------------|---------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------|------------------------------------------|
|                                              |                                                                                                                                 |                                                                     |                             |               |                   | 08/23/1989                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               | 18/1996           | J. J |
| <u></u> -                                    | Place of Business                                                                                                               | 2a, Mailing Address                                                 |                             |               |                   | 4. FEI Number<br>65-0147552                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               | _ <del></del>     | pplied For<br>of Applicable              |
| 21 Suite, Apt                                | #, etc                                                                                                                          | Suite, Apt. #, etc.                                                 | <del></del>                 |               | · <del></del>     | 5. Certificate of Status Desired                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               | \$8.75 A          | Additional                               |
| City & Stal                                  | te                                                                                                                              | City & State                                                        |                             | _,            |                   | Election Campaign Financing     Trust Fund Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | П             | \$5.00<br>Added t |                                          |
| Zip<br><b>24</b> ]                           | Country<br>25                                                                                                                   | 7 <sub>IP</sub>                                                     | 30 Cou                      | intry         |                   | 8. This corporation has liability for Florida Statutes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                   |                                          |
| 241                                          | 9. Name and Address of Curre                                                                                                    |                                                                     |                             |               |                   | 10. Name and Address of New Re                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                   |                                          |
| MO                                           | NATENEGRO, FRANCISCO                                                                                                            |                                                                     |                             | 81            | Name              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
|                                              | 95 N. W. 13TH ST                                                                                                                |                                                                     |                             | 82            | Street A          | ddress (P.O. Box Number is Not Accepta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ble)          |                   |                                          |
| MLA                                          | AMI FL 33172                                                                                                                    |                                                                     |                             | 83            |                   | Printing and the second |               |                   |                                          |
|                                              |                                                                                                                                 |                                                                     |                             | Ш             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
|                                              |                                                                                                                                 |                                                                     | :                           | 84            | City              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | FL            | 85 Zip (          | Code                                     |
| office or                                    | registered agent, or both, in the Stat<br>am familiar with, and accept the oblig<br>Structure type to perform a obligistered at | e of Florida. Such change was<br>gations of, Section 607.0505. F    | s authorize<br>Florida Stat | d by<br>lutes | the corpo         | corporation submits this statement for the<br>oration's board of directors. I hereby acce<br>equired when renstating)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | pt the appo   | intment as        | registered                               |
| 12.                                          | OFFICERS A                                                                                                                      | ND DIRECTORS                                                        | 13.                         |               |                   | ADDITIONS/CHANGES TO OFFI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | CERS AND      | DIRECTOR          | IS IN 12                                 |
| TITLE                                        | D PONTENEODO EDANOISCO                                                                                                          | ☐ DELETE                                                            | 1.1 TI                      |               |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | Change            | Addition                                 |
| NAME                                         | MONTENEGRO, FRANCISCO<br>9325 NW 13TH STREET                                                                                    |                                                                     | 1.2 N                       |               | 4000000           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| STREET ACKIRESS  CITY-ST-ZIP                 | MIAMI FL                                                                                                                        |                                                                     |                             |               | ADDRESS<br>IT-ZIP |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| TILE                                         | (110 077)                                                                                                                       | DELETE                                                              | 2.1 TI                      |               | 11-211            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | Change            | Addition                                 |
| NÂME                                         |                                                                                                                                 |                                                                     | 2.2 N                       | AME           |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| STREET ADDRESS                               |                                                                                                                                 |                                                                     | 2.3 S                       | TREET         | ADDRESS           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| CHTY - ST - ZIF                              |                                                                                                                                 | D No. Fre                                                           |                             |               | ST-ZIP            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | [ ] (h            | Addition                                 |
| HILE                                         |                                                                                                                                 | [_] DELETE                                                          | 3.1 Ti<br>3.2 N             |               |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | L Change          | Addition                                 |
| NAME<br>STREET ADDRESS                       |                                                                                                                                 |                                                                     |                             |               | ADDRESS           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| CHY-SI ZIP                                   |                                                                                                                                 |                                                                     |                             |               | ST-ZIP            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| TillE                                        |                                                                                                                                 | DELETE                                                              | 4.1 T                       | TLE           |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | Change            | Addition                                 |
| NAME                                         |                                                                                                                                 |                                                                     | 4.21                        | IAME          |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| STREET ADDRESS                               |                                                                                                                                 |                                                                     |                             |               | ADDRESS           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| C:TY - ST - ZIP                              |                                                                                                                                 | DELETE                                                              |                             |               | ST-ZIP            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | Change            | Addition                                 |
| THUE<br>NAME                                 |                                                                                                                                 | L1 Nerel                                                            | 5.1 TI<br>5.2 N             |               |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   | Las recontroll                           |
| STREET ADDRESS                               |                                                                                                                                 |                                                                     |                             |               | ADDRESS           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| City - St - ZiP                              |                                                                                                                                 |                                                                     |                             |               | SY-ZIP            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| TOTLE                                        |                                                                                                                                 | ☐ DELETE                                                            | 6.1 T                       | •             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | Change            | Addition                                 |
| NAME                                         |                                                                                                                                 |                                                                     | 6.2 N                       | AME           |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| STREET AL-DRESS                              |                                                                                                                                 |                                                                     |                             |               | F ADDRESS         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                   |                                          |
| CITY-ST-7IP                                  | h and destroy the first the second second                                                                                       | and with the addison stone and according                            |                             |               | ST-ZIP            | oted in Contine 118 07/9/0 Elevide Clatut                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | on I further  | nortific that     | the                                      |
| informat<br>Lam an                           | on indicated on this annual report or                                                                                           | supplemental annual report is<br>or the receiver or trustee empt    | s true and<br>owered to     | acci<br>exec  | urate and         | ated in Section 119.07(3)(i), Florida Statut that my signature shall have the same leg-<br>eport as required by Chapter 607, Florida                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ial effect as | s it made un      | nder oath; tha                           |