

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

FILED
Jun 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M07677** (1) Filed on 1/26/98

1. Corporation Name
~~LEXPRESS COURIERS, INC.~~ / Name has been amended TO:

LEXPRESS MEDIA SERVICES, INC.



Principal Place of Business C/O JULIO D. SEGARRA 485 N.W. 49 AVE. MIAMI FL 33126	Mailing Address C/O JULIO D. SEGARRA 485 N.W. 49 AVE. MIAMI FL 33126
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 6400 S.W. 33rd Street Suite, Apt. #, etc. 22 City & State 23 Miami, FLORIDA Zip Country 24 33155 25		2a. Mailing Address 26 6400 S.W. 33rd Street Suite, Apt. #, etc. 27 City & State 28 Miami, FLORIDA Zip Country 29 33155 30		3. Date Incorporated or Qualified 11/07/1984	
		4. FEI Number 59-2470212		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent SEGARRA, JULIO D. 485 N.W. 49 AVE. MIAMI FL 33126		10. Name and Address of New Registered Agent 81 Name SEGARRA, JULIO D. 82 Street Address (P.O. Box Number is Not Acceptable) 6400 S.W. 33rd Street 83 84 City MIAMI FL 85 Zip Code 33155	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Julio D. Segarra* **JULIO D. SEGARRA / President** **4/15/98**
(NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	PTD
NAME	SEGARRA, JULIO D.	1.2 NAME	SEGARRA, JULIO D.
STREET ADDRESS	485 N.W. 49 AVE.	1.3 STREET ADDRESS	6400 S.W. 33rd Street
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI, FL 33155
TITLE	SD	2.1 TITLE	
NAME	SEGARRA, ORLANDO F.	2.2 NAME	
STREET ADDRESS	485 N.W. 49 AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Julio D. Segarra* **4/15/98** (305)663-0420

CR2E034 (10/97)