2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P00000009297

1. Entity Name
M C T EXPRESS, INC.

Principal Place of Business	Mailing Address
2766 NW 62 ST.	2766 NW 62 ST.
MIAMI, FL 33147	MIAMI, FL 33147

DO NOT WRITE IN THIS SPACE

01302008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-1002016	Not Applicable

5. Certificate of Status Desired   **$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

ALVAREZ, RAUL
2766 NW 62 ST.
MIAMI, FL 33147

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

| **FILE NOW!!! FEE IS $150.00**
After May 1, 2008 Fee will be $550.00 | **9.** Election Campaign Financing
Trust Fund Contribution. ☐ | **$5.00** May Be
Added to Fees | |

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	MOISE, RUDOLPH D.O.
STREET ADDRESS	2766 NW 62 ST.
CITY-ST-ZIP	MIAMI, FL 33147

TITLE	D
NAME	GONZALEZ, RAYMOND
STREET ADDRESS	2766 NW 62 ST.
CITY-ST-ZIP	MIAMI, FL 33147

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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02/14/08-80046-003 158.75

**DO NOT WRITE.
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Ray Gonzalez 1/30/08 (305) 779-0505
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #