

2003 **FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 23, 2003 8:00 am**  
**Secretary of State**

04-23-2003 90175 012 \*\*\*150.00

DOCUMENT # P00000111141

1. Entity Name

PROGRESO EXPRESS CORP



11009839

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
525 NW 73RD AVENUE

Suite, Apt. #, etc.

3. Mailing Address  
525 NW 73RD AVENUE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
MIAMI

City & State  
MIAMI

4. FEI Number 65-1058765

Applied For  
Not Applicable

Zip  
33126

Country  
MIAMI DADE

Zip  
33126

Country  
MIAMI DADE

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

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name PERDOMO, MIGUEL A.

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

525 NW 73RD AVENUE

City MIAMI

FL Zip Code  
33126

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

*Miguel A. Perdomo President* *x* *Perdomo*

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

(NOTE: Registered Agent Signature required when registering)

DATE

4/19/03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PERDOMO, MIGUEL A.  
525 NW 73RD AVENUE  
MIAMI FL 33126

TITLE  
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CITY-ST-ZIP

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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Miguel A. Perdomo President* *x* *x* *Perdomo* 4/19/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

305 260-0571

Daytime Phone #