## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Sep 15, 2004 8:00 am Secretary of State

09-15-2004 90002 009 \*\*\*158.75

1. Entity Nam	MEN I # PU1000020 MES EXPRESS, INC.	1983							
112 SOUTH DR		Mailing Address PO BOX 653725 MIAMI, FL 33265			54072991				
2. Principal P	lace of Business	3. Mailing Address	. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		08162004 Chg-P CR2E034 (10/03)				
City & State		City & State	City & State		4. FEI Number Applied For 65-1104000 Not Applicable				
Zip	Country	Zip	Country		of Status Desired	. [[]/ \$	8.75 Add	itional	
, -	6. Name and Address of Current		7. Name and	7. Name and Address of New Registered Agent					
ı									
PESTONIT, MARIA 112 SOUTH DR KEY LARGO, FL 33037			Street Add	Street Address (P.O. Box Number is Not Acceptable)					
			City			FL	Zip Code		
	named entity submits this statement fi ions of registered agent.	or the purpose of changing its re	gistered office or r	egistered agent, or bo	oth, in the State of	Florida. I am fa	miliar with,	and accept	
SIGNATURE_	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: F	legistered Agent signature	e required when reinstating)	<del></del>	DATE			
FILE NOW!!! FEE IS \$150.00  Due by September 8, 2004  9. Election Campaign Fina Trust Fund Contribution			· · ·	\$5.00 May Be Added to Fees		e with s. 607.1 id not receive			
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS	/CHANGES TO O	FFICERS AND I	DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS	MS PESTONIT, MARIA L PO BOX 653725	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	MIAMI, FL 33265	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Délete Délete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	- Adam - Pul Danier	,		Change T	*Addition*	

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NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

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 it true and accurate and betting 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 truestee 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 allachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

CITY-ST-ZIP

CITY-ST-ZIP

ID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

Delete

Delete

☐ Change

Change

☐ Change

Addition

Addition

Addition

## Affachment

Good Times Express, Inc. 5890 SW 79 Court Miami, Florida 33143

Phone: (305) 412-4515 Fax: (305) 595-6215 Fax: (305) 595-6215

US Customs Bonded Carrier

Wednesday, September 08, 2004

4800000000983

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Corporate Annual Report

Dear Sir/Madam:

Attached please find a copy of our corporate annual report for 2004. Our original was sent to your office on March 17, 2004 and was apparently lost. This was brought to our attention when we inquired as to the whereabouts of our certificate of status. Your agent suggested that we send a copy of our 2004 corporate annual report along with this letter to ensure proper processing and also to avoid additional fees.

Please process our application at your earliest convenience so that we may receive our certificate of status. If you should have any questions, please call me or Maria at (305)412-4515.

Your attention to this matter is greatly appreciated.

Maria Péstonit

President -

MPL/wgaf

attachment enclosed