## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATION STATEMENT	FLORIDA DEPARTMEN' Secretary of Sta	ate	FILE 06 JUN 26 F		
DOCUMENT # POSOOOO 41399  1. Corporation Name  Express MARKETING INTERNATIONAL  SERVICES INC.				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
~e	RAVICES INC.		RE		1 02-06	
	i Office Address West Okechobee Ri	3. Mailing Office Address		CR2E081 (12/05)		
Suite, Apt. #	t. etc. 'r - 337A	Suite, Apt. #. etc.		4. Date Incorporated or Qualified To Do Business in Florida  O4/02/2001		
City & State	LEON . FL	City & State		FE! Number 65 - 109612	Applied For	
Zip 330.	16 Country	Zip Count	y 6		59.75 Addition   5 mm	
)		7. Name and Address	of Current Registered A	Agent		
Signature o Registered	Agent	ove named corporation, am familiar of Conting and EGISTERED AGENT MUST SIGN	<u>-</u>	FL strong of section 607,0505 or 6	17.0503, F.S.	
Titles	Name of Officers and/or Director		treet Address of Each ifficer and/or Director		City / State / Zip	
P	NANCY L. DATE	99. 9919 0	9919 West Orecroses		hocenn.	
	,		5017-3371		F1. 33016	
			: [: # · #	30007 97/07/0601	7137013 021016 **750.00	
this re owed on this	fy that I am an officer or director or the receinstatement application, the reason for director or the corporation have been paid and this application is true and accurate, and my STURE:	isolution has been eliminated, the co a names of individuals listed on this f	rporate name satisfies the orm do not qualify for an effect as if made under o	e requirements of section 607.0 exemption contained in Chapte	401 or 617.0401. F.S., that all fees	

This leven is to wrong you, Those I NEVER necession the annual report (2002)

Nontierrion for Express Horsening International Services, Inc.

Documes to reinstate my company. Please ocept.

This cetter as a woived for the \$600.00 policies persons persons feel persons.

A oppreciase your appendion to this MOTTER

NOO I promise THOT IT WON'T HOSPEN " MOGOTN

Hoppeneo ogoin.

Vaney L. artega