

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-03-2003 90127 006 ***150.00

DOCUMENT # P01000087785



1. Entity Name
CONDOR EXPRESS CORP.

Principal Place of Business
**10910 SW 25 ST
MIAMI FL 33165**

Mailing Address
**10910 SW 25 ST
MIAMI FL 33165**

2. Principal Place of Business
7660 SW 83 CT
Suite, Apt. #, etc.

3. Mailing Address
7660 SW 83 CT
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Miami- Florida
Zip
33143
Country
USA

City & State
Miami- FL
Zip
33143
Country
USA

4. FEI Number
65-1142211

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**CZETYRKO, CLAUDIA
10910 SW 25 ST
MIAMI FL 33165**

7. Name and Address of New Registered Agent

Name
CLAUDIA Czetyrko
Street Address (P.O. Box Number is Not Acceptable)
7660 SW 83 CT
City
Miami FL Zip Code
33143

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 *Czetyrko* **CLAUDIA Czetyrko** **3-31-03**
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, 2003 Fee will be \$550.00
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
D
ARCIDIAONO, IGNACIO J ☐ Delete
10910 SW 25 ST
MIAMI FL 33165

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ARCIDIAONO, MARIA C ☐ Delete
10910 SW 25 ST
MIAMI FL 33165

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
P
ARCIDIAONO IGNACIO J,
7660 SW 83 CT
MIAMI-FL 33143

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
P
ARCIDIAONO, MARIA C,
7660 SW 83 CT
MIAMI-FL 33143

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *SIGNATURE REQUIRED*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-03 (305) 553.6101
Date Daytime Phone #

CR2E034 (10/02)