


FILED

03 SEP 19 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000005454			
1. Entity Name EAGLE EXPRESS MESSENGER SERVICE, INC.			
Principal Place of Business 241 WEST PARK DRIVE, #104 MIAMI, FL 33172		Mailing Address 241 WEST PARK DRIVE, #104 MIAMI, FL 33172	
2. Principal Place of Business 973 S.W. 8 St.		3. Mailing Address 973 S.W. 8 St.	
City & State Miami, FL		City & State Miami, FL	
Zip 33130	Country USA	Zip 33130	Country USA
4. FEI Number 26-0014516		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VALLS, PEDRO 241 WEST PARK DRIVE, #104 MIAMI, FL 33172		7. Name and Address of New Registered Agent Name William Silva Street Address (P.O. Box Number is Not Acceptable) 973 S.W. 8 St. City Miami, FL Zip Code 33130	
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 <u>William Silva</u> William Silva 8/26/03 <small>Signature, last name, first name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when retaining)</small> DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00. Amended UBR is \$81.25. Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VALLS, PEDRO 241 WEST PARK DRIVE, #104 MIAMI, FL 33172 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Silva William 973 S.W. 8 St Miami, FL 33130 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800022660158 08/23/03--01087--001 ***81.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	09/19/03--01087--004 ***88.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	09/19/03--01087--004 ***88.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800022660158 09/19/03--01087--004 ***88.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>William Silva</u> William Silva 8/26/03 305.857.9188 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Change Phone #</small>			

CR2E034 (10/02)

JR 7/24



975 S.W. 8th Street Suite-C Miami, Florida 33130
Phone: (305) 857-9188 • Fax: (305) 857-9192

September 16, 2003

Florida Department of State
Amended Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Eagle Express Messenger Service, Inc.
Ref. No.: P02000005454

Dear Sir or Madam:

Back in March, we mailed in our Annual Report. In August, we had a change of Officers and Registered Agent so we filed the attached Uniform Business Report along with a check in the amount of \$61.25. The report was returned to us by your office, indicating that our annual report/uniform business report had not been filed. I immediately called your office and they confirmed they had never received the report and asked that I check if the check had been cashed. It had not been cashed. She then told me to send back the Uniform Business Report along with a letter of explanation and a check in the amount of \$88.75. Please accept this letter as our letter of explanation, along with the Uniform Business Report and check in the amount of \$88.75.

Should you require any additional information or documentation, please do not hesitate to call our office at (305) 857-9188.

Thank you for your understanding and cooperation.

Sincerely,

A handwritten signature in dark ink, appearing to read "William Silva", written over a horizontal line.

WILLIAM SILVA
President

/ws