

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000015995

1. Entity Name
RAYMOND EXPRESS SERVICES INC



Principal Place of Business
17841 NW 82ND AVE.
MIAMI, FL 33015

Mailing Address
17841 NW 82ND AVE.
MIAMI, FL 33015

FILED

04 SEP 30 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09272004 No Chg-P CR2E034 (10/03) 04

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4. FEI Number
01-0621922 Applied For
Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DELGADO, ISAIAS R
17841 NW 82ND AVE.
MIAMI, FL 33015

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IN THIS SPACE

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 obligation of registered agent.

SIGNATURE

Maria C. Delgado MARIA C. DELGADO

9/27/04

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
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
DELGADO, ISAIAS R
17841 NW 82ND AVE.
MIAMI, FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVD
DELGADO, MARIA C
17841 NW 82ND AVE.
MIAMI, FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

Maria C. Delgado MARIA C. DELGADO

9/27/04

3052183565

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #