ID: JUN 21'03 4:07 No.004 P.02

UNIFORM BUSINESS REPORT (UBR)

1 of 2

DOCUMENT # P02000039909

1. Entity Name
ENVI-EXPRESS, INC.

FILED

03 JUN 18 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
13841 OSPREY LINKS #236 ORLANDO FL 32837	13841 OSPREY LINKS #236 ORLANDO FL 32837

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
7998 E. Colonial Dr Suite, Apt. #, etc.	7998 E. Colonial Dr Suite, Apt. #, etc.
City & State: Orlando- Florida	City & State: Orlando-Florida
Zip: 32825 Country: USA	Zip: 32825 Country: USA

4. FEI Number: 02-0590819 (Applied For / Not Applicable)

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

6. Name and Address of Current Registered Agent

PELISSIER, HECTOR
13841 OSPREY LINKS #236
ORLANDO FL 32837

7. Name and Address of New Registered Agent

Name: FERNANDO PERDOMO
Street Address (P.O. Box Number is Not Acceptable): 11231 MOONSHINE CREEK CIR
City: ORLANDO FL Zip Code: 32825

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: H Pelissier 5/26/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

[redacted] FEE IS $[redacted]

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 PELISSIER, HECTOR 13841 OSPREY LINKS #236 ORLANDO FL 32837	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	PD PERDOMO, FERNANDO 11231 MOONSHINE CREEK CR ORLANDO, FL 32825	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	VSD ARISTY, MANUEL L. 11363 MOONSHINE CREEK CR ORLANDO, FL 32825	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

5/1/03 90367 030 $150.00

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: H Pelissier PRESIDENT 05/15/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTN: Michelle 2nd

Department of State
Division of Corporation
Corporate Filings
P.O Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

We are sending you another form with the signature you requested. However, we never received the first form you returned. The fee for $150.00 has been already paid with a check #763. Account #3605565 from Citibank.

Thank you very much for your cooperation.

Sincerely,
X-Treme Satellite