2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 28, 2004 8:00 am Secretary of State DOCUMENT # P02000091859 04-28-2004 90203 031 ***158.75 ENCARGO EXPRESS, INC. Principal Place of Business Mailing Address 4739 NW 72 AVE 4739 NW 72 AVE MIAMI, FL 33166 MIAMI, FL 33166 CR2E034 (10/03) No Cha-P 02282004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0693148 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MEJIA, JAIME DO NOT WRITE 4739 NW 72 AVE MIAMI, FL 33166 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 obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title il applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE DPST MEJIA, JAIME NAME. 4739 NW 72 AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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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 addrass with all other like empowered. SIGNATURE: PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ANO TYPED