2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000101344

1. Entity Name

ASSOCIATED MESSENGER EXPRESS, INC.



FILED
Jan 18, 2005 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

1041 W. COMMERCIAL BLVD., SUITE 102 FT. LAUDERDALE, FL 33309 1041 W. COMMERCIAL BLVD., SUITE 102 FT. LAUDERDALE, FL 33309



DO NOT WRITE IN THIS SPACE

01122005	No Chg-P	CR2E034 (10/03)
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4. FEI Number	 Applied For
11-3654918	Not Applicable
E Contiliants of Ptotus Desired	\$8.75 Additional

Certificate of Status Desired

Fee Required

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	_			

SMITH, JEFFREY B 1401 E. BROWARD BLVD., #206 FT. LAUDERDALE, FL 33301

DO NOT WRITE 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 II applicable (NOTE. Registered Agent signature required when reinstating) DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	ing \$5.00 May Be			
10.	OFFICERS AND DIRE	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUSSELL, WÎLLIAM R JR. 1041 W. COMMERCIAL BLVD., SUITI FT. LAUDERDALE, FL 33309	Ë 102				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				100000182365 01/19/05-80021-023 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN ⁻	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated of the corchanged,	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	ling does not qualify for the exem and accurate and that my signatured to execute this report as require to ther like empowered.	ption stated in Section 119.07(3)(re shall have the same legal effect d by Chapter 607, Florida Statute	i), Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director s; and that my name appears in Block 10 or Block 11 if		

NAME OF SIGNING OFFICER OR DIRECTOR