2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000122714

1. Entity Name C.B. COURIER SERVICE, INC.

FILED Mar 20, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

3081 N.E. 13TH AVENUE POMPANO BEACH, FL 33064 3081 N.E. 13TH AVENUE POMPANO BEACH, FL 33064



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

| 01092007 | No Chg-P | CR2E034 (11/05) |
|--------------|----------|-----------------|
| 4 EEI Number | | Applied For |

5. Certificate of Status Desired

90-0053405

Not Applicable \$8.75 Additional

Fee Required

BERNARDI, CHARLES G 3081 N.E. 13TH AVENUE POMPANO BEACH, FL 33064

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 bile if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | |
| FILE NOWIN FEE 13 3 130 UU | | Election Campaign Finance Trust Fund Contribution. | oing 🔲 | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIREC | CTORS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BERNARDI, CHARLES G 3081 N.E. 13TH AVENUE POMPANO BEACH, FL 33064 | | | | | |
| YITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | 000000673345 03/29/07-80025-016 150.00 | |
| TITLE NAME STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | | | | IN | THIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| TITLE | | | | | | |
| NAME | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | • | | | |
| | ertify that the information supplied with this fi | ing does not qualify for the ever | nntions cor | stained in Chapter 11 | Q Elevida Statutae I further positive that the information | |
| 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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. | | | | | | |