

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060736

Entity Name: SOGEXPRESS, INC.

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

11843-45 W. DIXIE HIGHWAY
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

11843-45 W. DIXIE HIGHWAY
MIAMI, FL 33161

New Mailing Address:

FEI Number: 65-1226059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BIELER, LAWRENCE
ONE BISCAYNE TOWER
SUITE 3700 TWO SOUTH BISCAYNE BLVD
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: LANOIX, FRANCK
Address: 1201 SOUTH OCEAN BLVD., APT. 101S
City-St-Zip: HOLLYWOOD, FL 33019

Title: VSD () Delete
Name: POLICARD, DOMINIQUE
Address: 3634 ALCANTARA AVENUE
City-St-Zip: MEDLEY, FL 33178

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: LANOIX, FRANCK
Address: 11843 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI, FL 33161

Title: VSD (X) Change () Addition
Name: POLICARD, DOMINIQUE
Address: 11843 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Change (X) Addition
Name: BEHRMANN, FRANTZ
Address: 11843 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Change (X) Addition
Name: JAAR, RAYMOND
Address: 11843 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Change (X) Addition
Name: BOISSON, PIERRE MARIE
Address: 11843 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI, FL 33161

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOMINIQUE POLICARD

VSD

04/29/2006

Electronic Signature of Signing Officer or Director

Date