


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 12, 2007 8:00 am
Secretary of State

05-04-2007 90073 037 ***158.75

DOCUMENT # P04000107903 1. Entity Name TL EXPRESS SERVICES, INC.	
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Principal Place of Business 4487 N UNIVERSITY DR FORT LAUDERDALE, FL 33351	Mailing Address 10420 NW 10TH STREET PLANTATION, FL 33322
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66018640



DO NOT WRITE IN THIS SPACE

04242007 No Chg-P CR2E034 (11/05)

4. FEI Number 42-1644121	Applied For Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

AMSTUTZ, TERESA L
10420 NW 10TH STREET
PLANTATION, FL 33322

**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: Teresa L. Amstutz TERESA L. Amstutz - President. 04/24/07.
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AMSTUTZ, TERESA L 10420 NW 10TH STREET PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERNANDEZ, HUMBERTO 10420 NW 10TH ST PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HERNANDEZ, MARGARITA 10420 NW 10TH ST PLANTATION, FL 33322
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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.

SIGNATURE: Teresa Amstutz 06/03/07. 974-572-3600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #