2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000118243 SIGNATURE AND TYPE ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 05, 2005 8:00 am Secretary of State 03-07-2005 90291 023 ***150.00

1. Entity Nami GLOBAL	EXPRESS I	I, INC.									
Principal Place 8256 NW 301 MIAMI, FL 33	TH. TERRACE		8256 NW 301	Mailing Address 8256 NW 30TH. TERRACE MIAM), FL 33122			66008723				
2. Principal Place of Business			3. Malling Addr	3. Mailing Address							
Suite, Apt. *, etc.			Suite, Apt. #, etc.			02182005	Chg-P	CR2E0	34 (10/03)		
City & State			City & State	City & State			76-07813	28	<u> </u>	plied For at Applicable	
Zip	Country		Zip	Zip Cour		5. Certificate of	ol Status Oesired		\$8.75 Add Fee Required		
	6. Name and	Address of Current	Registered Agent			7. Name and /	Address of New R	egistered /	Ageni		
Name Jose Li						is Arguell	lo				
JIMÉNÉZ, RICARDO 8256 NW 30TH. TERRACE					Street Address	s (P.O. Box Number	r is Not Acceptable	:)			
MIAMI, FL	33122				8230 N	W 30th Te	rrace				
									7:n Code		
·			<u> </u>		City Miami			FL	- 33132		
the obligati	tions of registered	bmits this statement fo d agent, L. Fact name of registered agent.			ared office or regist		i, in the State of Flo	orida. I am		and accopt	
						5.00 May Be -	·				
10.	OFFICERS AND DIRECTORS					ADDITIONS/C	CHANGES TO OFF	ICERS AND			
TITLE NAME	PSD JIMENEZ, RICARDO				TLE NATE				Change	Addition	
STREET ADDRESS CITY-ST-ZIP	8256 NW 30TH. TERRACE MIAMI, FL 33122			STE	reet address IY-SI-ZIP						
TITLE HAME STREET ADDRESS CITY-ST-ZIP		is Arguello 30th Terra FL 33122		STE	ILE LIME REET ADDRESS IY-SI-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	111th 1	TU JJICC		Celeto TIT NAI STE	ILE ANE REET ADDRESS IY-ST-ZIP				Change	Addition	
TITLE HAME STREET ADDRESS CITY-ST-ZIP			0.0	NAI STE	TLE AMÉ REET ADORESS TY-ST-ZIP				☐ Change	Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP				NAI STE	ile dae reet address iv-st-zip				Change	Addition	
TITLE MANE STREET ADDRESS CITY-ST-ZIP			0:	ST	ILE IME REET ADDRESS IV-ST-ZIP				Change	Addition	
12. I hereby of indicated of the correctanged,	poration or the re , or on an attachm	ormation supplied with supplemental report is sociver or trustee empt ment with an address,	this filling does not true and accurate owered to execute i with all other like or	t qualify for the ex- and that my sign this report as requ ripowered.	emption stated in S ature shall have the ulred by Chapter 6	Section 119.07(3)(i) le same legal effect i07, Florida Statutes), Florida Statutes. I as il made under di s; and that my name	e appears i	tify that the in am an officer n Block 10 or	iformation or director Block 11 if	