

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90008 041 ***150.00

DOCUMENT # P05000015648

1. Entity Name
MPH EXPRESS, CORP



Principal Place of Business
751 SE 11TH PLACE
104
HIALEAH, FL 33010

Mailing Address
751 SE 11TH PLACE
104
HIALEAH, FL 33010

40012000



2. Principal Place of Business - No P.O. Box #
3205 W. 16 Avenue
Suite, Apt. #, etc.
Lot E 90
City & State
Hialeah, FL

3. Mailing Address
3205 W. 16 Avenue
Suite, Apt. #, etc.
Lot E 90
City & State
Hialeah FL

01242008 Chg-P CR2E034 (12/06)

4. FEI Number
20-2274620
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
Zip Country
33012 Dade

6. Name and Address of Current Registered Agent

HORTA, MANUEL P
751 SE 11TH PLACE
HIALEAH, FL 33010

7. Name and Address of New Registered Agent

Name
Some
Street Address (P.O. Box Number is Not Acceptable)
3205 W. 16th Avenue
Lot E 90
City Hialeah FL Zip Code 33012

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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	<input type="checkbox"/> Delete
P	HORTA, MANUEL P	751 SE 11TH PLACE #104	HIALEAH, FL 33010	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		3205 W. 16 Avenue Lot E 90	Hialeah, FL 33012		
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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:

Manuel P. Horta
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/08 (305) 585-9425
Date Daytime Phone #