## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P05000041877** 

1. Entity Name MGB EXPRESS, INC.



FILED Mar 12, 2008 08:00 A Secretary of State

Principal Place of Business

MIRIAM GONZALEZ 9075 NW 115TH ST HIALEAH, FL 33018 Mailing Address

MIRIAM GONZALEZ 9075 NW 115TH ST HIALEAH, FL 33018



DO NOT WRITE IN THIS SPACE

02282008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-2532950

Applied For
Not Applicable

5. Certificate of Status Desired

\$3.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, MIRIAM 9075 NW 115TH ST HIALEAH, FL 33018 DO NOT WRITE IN THIS SPACE

						9 91 9	
	named entity submits this statement for the plions of registered agent.	urpose of changing its register	red office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and ac	cept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOT		applicable (NOTE Register	ed Agent signaturé	required when reinstating)	DATE		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fina     Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000855609 03/27/08-80057-003 158.75		
10.	OFFICERS AND DIRECT	TORS	T	4	The same that the same to the	~ ±.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P GONZALEZ, MIRIAM 9075 NW 115TH ST HIALEAH, FL 33018						
NAME STREET ADDRESS CITY-ST-ZIP			· · · · · ·			ş1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		DO'	NOT WRITE		
TITLE NAME STREET ADDRESS			38	IN :	THIS SPACE		

12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF AGE

3-9-08

305-301-4751

gle.

Daytime Phone #