

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157421

Entity Name: A D L EXPRESS INC

FILED  
Jan 22, 2007  
Secretary of State

## Current Principal Place of Business:

4708 LUCERNE LAKES BLVD  
E 205  
LAKE WORTH, FL 33467 US

## New Principal Place of Business:

2291 SW ALMANSA AVE  
ORLANDO, FL 34953 US

## Current Mailing Address:

4708 LUCERNE LAKES BLVD  
E 205  
LAKE WORTH, FL 33467 US

## New Mailing Address:

2291 SW ALMANSA AVE  
ORLANDO, FL 34953 US

FEI Number: 20-3861197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAURE, AUGUSTO  
4708 LUCERNE LAKES BLVD  
E 205  
LAKE WORTH, FL 33467 US

## Name and Address of New Registered Agent:

MAURE, AUGUSTO  
2291 SW ALMANSA AVE  
ORLANDO, FL 34953 US

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: AUGUSTO MAURE

01/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MAURE, AUGUSTO  
Address: 4708 LUCERNE LAKES BLVD E 205  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: VP ( ) Delete  
Name: ARAGON, LINA M  
Address: 4708 LUCERNE LAKES BLVD E 205  
City-St-Zip: LAKE WORTH, FL 33467 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MAURE, AUGUSTO  
Address: 2291 SW ALMANSA AVE  
City-St-Zip: ORLANDO, FL 34953 US

Title: VP (X) Change ( ) Addition  
Name: ARAGON, LINA M  
Address: 2291 SW ALMANSA AVE  
City-St-Zip: ORLANDO, FL 34953 US

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: LINA M ARAGON

VP

01/22/2007

Electronic Signature of Signing Officer or Director

Date