## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000026856

GILLIAM, FENDRICK III

5530 NW 5TH AVENUE

MIAMI, FL 33127 US

Name:

Address: City-St-Zip:

Entity Name: MLH EXPRESS INC

FILED Aug 20, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5530 NW 5TH AVENUE MIAMI FL, FL 33127 **Current Mailing Address: New Mailing Address:** 5530 NW 5TH AVENUE MIAMI FL, FL 33127 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HANKS, MAURICE L 5530 NW 5TH AVENUE MIAMI, FL 33127 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HANKS, MAURICE L Name: Name: 5530 NW 5TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33127 City-St-Zip: Title: DR (X) Delete Title: () Change () Addition Name: SANDS, FRANKLIN JR Name: 3613 SW 70TH AVENUE Address: Address: MIRAMAR, FL 33023 US City-St-Zip: City-St-Zip: Title: Title: DR (X) Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MAURICE HANKS P 08/20/2007