FILED Mar 23, 2007 8:00 am Secretary of State

20	ANNUAL REPORT	•
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DOCUMENT # P060000415 1. Entity Name M.P GLOBAL EXPRESS CORP.			553			03-23-200	•		
Principal Plac	e of Busines	s	Mailing Address			001001 0			
5758 N.W. 113 AVENUE MIAMI, FL 33178		5758 N.W. 113 AVENUE Miami, Fl 33178		• .					
Mirani, IL J.	3170		1411711411, 1 L 33170						
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2. Principal Place of Business - No P.O. Box # 3. Mailing Address									
11679	WW C	78 lane	11675 NW	78 Lan	P	BASIA BIITI ABIII ABISI ABI	1 8011 61801 1180	I BIIDI DISBU IIII	B B B B B B
Suite, Apt.		- 10 Carre	Suite, Apt. #. etc.	10 - 11					
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City & State			City & State		4 CELNiumb			1 140	plied For
Mich		FL	Miami F	Florida	4. FEI Numb	21585	ς	<u> </u>	
	.,,,,				13 2	01202			Applicable
Zip		Country	Zip 22129	Country	5. Certificate	of Status Desired		8.75 Addi	
<u>3317</u>	<u>18</u>	0714	331101	A(O)				ee Required	1
	6. Name	and Address of Current I	Registered Agent		7. Name and	Address of New R	egistered Ag	gent	
				Name (meda	Monio	\circ		1
PINEDA, N				Stroot Addro		er is Not Acceptable			
5758 N.W.		NUE		Street Addre	iss (F.O. BOX MUITO	ei is Not Acceptable	1)		
MIAMI, FL	33178			11(7		70 1			
				1161	2 NM	18 C	M		
				City L 15	;		FL	Zip Code	שר וכ
		<u> </u>			iami			<u> </u>	21 10
			the purpose of changing its re	gistered office or reg	istered agent, or bo	th, in the State of Flo	orida. I am fa	miliar with, a	and accept
the obtigat	tions of regis	tered agent.							
CIONIATURE									
SIGNATURE.	Signature, types	or printed name of registered agent a	nd tite if applicable. (NOTE: R	egistered Agent signature rec	quired when reinstating)		DATE		
		,	- 1						
			9. Election Campaign	Financino	\$5.00 мау Ве				
		FEE IS \$150.00 7 Fee will be \$550.0			Added to Fees				
A1101 1111	., .,								
10.		OFFICERS AND I	DIRECTORS	11.		CHANGES TO OFF			IN 11
TITLE	D		☐ Delete	TITLE D	Pineo	Ja, Mor	nica.	Change	☐ Addition
NAME	PINEDA.	MONICA		NAME	1675 N	18 Wil	Lane		Ī
STREET ADDRESS	5758 N.W	V. 113 AVÉNUE		21HEET ADDRESS					ł
CITY-ST-ZIP	MIAMI, F	L 33178		CITY-ST-ZIP	Miami	FL. 331	178		
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CITY-ST-ZIP				CITY-ST-ZIP					
12. I hereby	certify that th	ne information supplied with	this filing does not qualify for I	the exemptions conta	ined in Chapter 11	9, Florida Statutes. I	further certif	ly that the in	nformation
indicated	on this repo	ort or supplemental report is	this filing does no quality for it true and appurate and that my owered to execute this report as with all other like emocweroe.	signature shall have	the same legal effe	ct as if made under	oath; that I ar	n an officer	or director
oi ine coi changed	ipuration or I I, or on an at	tachment with an andress	wered to execute this report as with all other like emidwered.	required by Charte	rionda Statut	es, and that my ham	e appears in	DIOCK IU OF	DIOCK 11 II
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SIGNAT	IURF.	' 1 ()	41 11	X MX	<i>'</i>	3-19-03	†		
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