FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996	

DOCUMENT # P93000019245 (8)						1					
	•	-	RN XPRESS, INC.								
Pri	ncipal Place	e of Business	3	Mailing Address			· · · · · · · · · · · · · · · · · · ·	-	ii fi iii baibi		811 01801 0 111 1801
2641 S.W. 31ST CT. MIAMI FL 33133				2641 S.W. 31ST CT.							
Principal Place of Business			On Marino Address	·			3. Date Incorporated or Qualified 03/15/1993		te of Last F 05/31/19		
21		26					4. FEI Number 65-0396401			Applied For Not Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.	h.v-d			5. Certificate of Status Desired		\$8.7	5 Additional
23	City & State	3		City & State	City & State			6. Election Campaign Financing		\$5.0	Required May Be
	Zip		Country	Zip	Zip Country			Trust Fund Contribution 8. This corporation has liability for			ed to Fees 3 199.032,
24		9. Name	25 and Address of Currer	129 nt Registered Agent	30	Т			i ∐ No		
POMPA, JORGE 2641 S.W. 31ST CT. MIAMI FL 33133						83 84 City	>6C	mí	ීරීර FL	DET 85 Z	ر دورگارا م
	familiar witi	o the provision and agent, or the agent, or the agent agent and agent ag	ons of Sections 607.0502 both, in the State of Floric pt the obligations of, Sect	2 and 607,1508, Florida Stal ida. Such change was autho tion 607,0505, Florida Statul	tutes, the aborized by the ites.	ove-named of corporation?	corporations board r	on submits this statement for the pur of directors. I hereby accept the appr		ianging its i s registered	registered office d agent. I am
	NATURE	Signature, typed	or printed name of registered agont		(NOTE: Registered	id Agent signature	e required wh	hen reinstating)	DATE		
12.		nn.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFF		D DIRECTO	DRS IN 12
TITLE	I	PD POMPA	IUDGE	JORGE Y. 31ST CT.		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS				☐ Change	Addition
	ET ADDRESS										
	ST-ZIP		L 33133								
TITLE		SD	E 00 100	DELETE		1.4 City-St-ZiP 2 1 Title					
NAME	:		, JUANA			2 2 NAME			L	Change	Addition
STREE	ET ADDRESS		W. 31ST CT.		2.3 STREET ADDRESS						
	ST - ZIP		L 33133			DITY-ST-ZIP	`				
TITLE	}	VD		DELETE	3 1 1					Cnange	Addition
NAME			, ROBERTO		3 2 N	IAME			-	-	_
	T ADDRESS		W. 31ST CT.		3 3. 5	STREET ADDRESS	3				
TITLE	ST-ZIP	MIMMIF	L 33133	Doute		HY-ST-ZIP					
NAME				DELETE	4.11					Change	Addition
	T ADDRESS				4.2 N/						
	ST-ZIP					TREET ADDRESS					
TITLE				DELETE	5 1 T	HTY-ST-ZIP				3 05	
NAME					5.2 NA				ι	Change	Addition
STREE	T ADDRESS					TREET ADDRESS					
CITY-	ST-ZIP	-100 10				ITY-ST-ZIP	1				
TITLE				DELETE	6 1 71			No. 1 Mary 12		7 Change	Addition
NAME					6 2 NA	AME			•		
	1 ADDRESS				6.3 \$1	REET ADDRESS					
	ST-ZIP	portification a	the information supplied w		6.4 C	ITY-ST-ZIP	1				

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

TORGE POMPA PRES

5-71-96 800577-5286

CR2E034 (12/95)