FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000051471 (9)

SONIC DELIVERY SERVICES, INC.

Principal Place		Mailing Address						
6911 N.W. 87 A Miami FL 3317 US		6911 N.W. 87 AVE Miami Fl 33178-1625 US						
					3. Date Incorporated or Qualified 07/19/1993	3a. Date of Last Report 02/09/1996		
2. Principal Pla	ace of Business	2a. Mailing Adore	188		4. FEI Number	Applied For		
21		26			65-0422796	Not Applicable		
Suite Apt. # etc.		Suite, Apt #,	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State)	City & State 28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	7φ 29	30	ountry	8. This corporation has liability for in Florida Statutes	tangible tax under s. 199.032, Yes No		
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
6911	es, donna 1 NW 87th Avenue VII FL 33178			81 Name 82 Street	MILENA PENA Address P.O. Box Number is Not Acceptable	EUIE		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Stato of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the oblight gry. pl., Section 607.0505, Florida Statutes.

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SIGNATURE .	Milera (Fig.	actula data (MCTE	Registered Agent signature	required when relocation)	JAI/6/9/	
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1:			S IN 12
THTLE	PT	DELETE	1.1 TITLE		Change	Addition
NAME	ALPIZAR, JORGE		1.2 NAME			
STREET ADDRESS	6911 NW 87TH AVENUE		1.3 STREET ADDRESS			
DITY-ST-ZIP	MIAMI FL 33178		1.4 CITY-ST-ZIP			
TITLE	V	DELETE.	2.1 TITLE	V	Change	☐ Addition
NAME	Pena, Kenneth		2.2 NAME	KENNETH PENA		
STREET ADDRESS	6444 SW 152ND CIRCLE PLACE		23 STREET ADDRESS	KENNETH PENA 6911 NW BTANE		
CiTY - ST - ZIP	MIAMI FL 33193		2 4 CTY - ST - ZIP	MIAMI, FL 33178	_	
TITLE	SD	DELETE	3 i Title	5D	L Change	Addition
NAME	reyes, donna		3.2 NAME	MILENA PENA		
STREET ADDRESS	7231 MIAMI LAKES DR, #C-10		3 3 STREET ADDRESS	6911 NWETAVE		
CITY - ST - ZIP	MIAMI LAKES FL		3 4. CITY - ST - ZIP	MIAMI FL 33178		
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4, 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - S1 - ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-SI-7P			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-7-P			6.4 CITY - S1 - 7iP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and cated 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 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

SIGNATURE:

FILED

Jan 16 1997 8:00am

Secretary of State