

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Norman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

20 MAY - 1 PM 3:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000058388 (8)**

1. Corporation Name

THE EXPEDITER, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
6667 WHITE DR W. PALM BEACH FL 33407 US		6667 WHITE DR W. PALM BEACH FL 33407 US	
2. Principal Place of Business		2a. Mailing Address	
21	State, Apt # etc	26	State, Apt # etc
22	City & State	27	City & State
23	Zip	28	Zip
3. Date Incorporated or Qualified		3a. Date of Last Report	
08/16/1993		05/20/1994	
4. FEI Number		Applied For	
65-0431018		Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional Fee Required	
☐		☐	
6. Election Campaign Financing		\$5.00 May Be Added to Fees	
Trust Fund Contribution		☐	
7. This Corporation has liability for intangible tax under S. 199.032 Florida Statutes		☒ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MAGNUSON, SVEN E 6667 WHITE DR W. PALM BEACH FL 33407		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 600.01 and 600.02, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. If the change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of this position under the Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	D MAGNUSON, SVEN E	1 NAME	☒ Change ☐ Addition
STREET ADDRESS	2800 N. FLAGLER DR. #804	2 NAME	# 704
CITY, ST, ZIP	W. PALM BEACH FL 33407-5226	3 STREET ADDRESS	
NAME		4 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		5 NAME	
CITY, ST, ZIP		6 STREET ADDRESS	
NAME		7 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		8 NAME	
CITY, ST, ZIP		9 STREET ADDRESS	
NAME		10 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		11 NAME	
CITY, ST, ZIP		12 STREET ADDRESS	
NAME		13 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		14 NAME	
CITY, ST, ZIP		15 STREET ADDRESS	
NAME		16 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		17 NAME	
CITY, ST, ZIP		18 STREET ADDRESS	
NAME		19 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		20 NAME	
CITY, ST, ZIP		21 STREET ADDRESS	
NAME		22 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		23 NAME	
CITY, ST, ZIP		24 STREET ADDRESS	
NAME		25 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		26 NAME	
CITY, ST, ZIP		27 STREET ADDRESS	
NAME		28 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		29 NAME	
CITY, ST, ZIP		30 STREET ADDRESS	
NAME		31 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		32 NAME	
CITY, ST, ZIP		33 STREET ADDRESS	
NAME		34 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		35 NAME	
CITY, ST, ZIP		36 STREET ADDRESS	
NAME		37 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		38 NAME	
CITY, ST, ZIP		39 STREET ADDRESS	
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STREET ADDRESS		41 NAME	
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NAME		43 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		44 NAME	
CITY, ST, ZIP		45 STREET ADDRESS	
NAME		46 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		47 NAME	
CITY, ST, ZIP		48 STREET ADDRESS	
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STREET ADDRESS		50 NAME	
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NAME		52 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		53 NAME	
CITY, ST, ZIP		54 STREET ADDRESS	
NAME		55 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		56 NAME	
CITY, ST, ZIP		57 STREET ADDRESS	
NAME		58 CITY, ST, ZIP	☐ Change ☐ Addition
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CITY, ST, ZIP		60 STREET ADDRESS	
NAME		61 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		62 NAME	
CITY, ST, ZIP		63 STREET ADDRESS	
NAME		64 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		65 NAME	
CITY, ST, ZIP		66 STREET ADDRESS	
NAME		67 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		68 NAME	
CITY, ST, ZIP		69 STREET ADDRESS	
NAME		70 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		71 NAME	
CITY, ST, ZIP		72 STREET ADDRESS	
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STREET ADDRESS		74 NAME	
CITY, ST, ZIP		75 STREET ADDRESS	
NAME		76 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		77 NAME	
CITY, ST, ZIP		78 STREET ADDRESS	
NAME		79 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		80 NAME	
CITY, ST, ZIP		81 STREET ADDRESS	
NAME		82 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		83 NAME	
CITY, ST, ZIP		84 STREET ADDRESS	
NAME		85 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		86 NAME	
CITY, ST, ZIP		87 STREET ADDRESS	
NAME		88 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		89 NAME	
CITY, ST, ZIP		90 STREET ADDRESS	
NAME		91 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		92 NAME	
CITY, ST, ZIP		93 STREET ADDRESS	
NAME		94 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		95 NAME	
CITY, ST, ZIP		96 STREET ADDRESS	
NAME		97 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		98 NAME	
CITY, ST, ZIP		99 STREET ADDRESS	
NAME		100 CITY, ST, ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 190.03(2)(b) Florida Statutes. I further certify that this information was filed on this annual report or supplemental annual report as required, as a shareholder and that my signature shall have the same legal effect as a printed signature. That I am an officer or director of this corporation or the reason on which my signature is required by Chapter 667, Florida Statutes, and that my name appears on Block 1, or Block 1a of the report, as an officer or director with an address.

SIGNATURE: 4-27-95 467-263 2220