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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9400033072 (7)

MACOB COURIER SERVICE, INC.

Principal Place of Business 7401 NW 8TH STREET STE. K MAMI FL 33126 Mailing Address

7401 NW 8TH STREET STE. K MIAMI FL 33126-2928

FILED Feb 11 1997 8:00am Secretary of State



				 Date Incorporated or Qualified 05/02/1994 	od 3a. Date of Last Report 03/12/1996	
2. Principal Place of Business 28		2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0584723	Not Applicable	
Suite, Apt. #, etc. 22		Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & St	tate	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability to	for intangible tax under s. 199.032,	
24	25	29	30	Florida Statutes	Yes No	
,	Name and Address of Curre	nt Registered Agent		10. Name and Address of New	Registered Agent	
A(Guila, Edna y		. 81 Nam	e .		
7401 NW 8TH STREET STE. K MIAMI FL 33128			82 Stree	82 Street Address (P.O. Box Number is Not Acceptable)		
				offeet Address (1.0. pox realition is real Acceptable)		
			83			
					1	
	•		84 City		FL 85 Zip Code	
11. Pursua	of to the provisions of Sections 607 05	02 and 607.1508. Florida St	atutes, the above-name	ed corporation submits this statement for th		
office of	or registered agent, or both, in the State	e of Florida. Such change w	as authorized by the co	orporation's board of directors. I hereby ac	cept the appointment as registered	
agent.	Lam familiar with, and accept the oblig	Jauons of, Section 607.0505	, Florida Statutes.			
SIGNATUR	E. Signature hypodice printed name overagistered ag	ect and tien it moteable	NOTE: Registered Agent signal	ure required when reinstation)	DATE	
12.		ID DIRECTORS	13.		FICERS AND DIRECTORS IN 12	
TITLE	P	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	AGUILA, EDNA Y		1.2 NAME			
SIRSET ADORES	TAGE AND OTH CIDELT OFF A	(1.3 STREET ADDRES		e-	
	MIAMI FL 33126	,		•		
CITY - ST - ZIF	V	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition	
	BORJA, MARIO C	D Marie			C Custile C Vitarion	
NAME	DOING BRITIO					
	7401 NW OTH CTREET CTE &	,	2.2 NAME			
STREET AODRES		(2.3 STREET ADDRES	s ,		
CITY-SI-ZIP	MIAMI FL 33128		2.3 STREET ADDRES 2.4 City-St-zip	, .		
CITY-SI-ZIP	MIAMI FL 33128 ST	(DELETE	2.3 STREET ADDRES 2.4 CHY-SY-ZIP 3.1 TITLE	S .	Change Addition	
CITY-SI-7PP TITLE NAME	MIAMI FL 33128 ST COKA, FANNY B	DELETE	2.3 STREET ADDRES 2.4 CITY-SY-ZIP 3.1 TITLE 3.2 NAME		Change Addition	
OITY-SI-ZIP TITLE NAME STREET ADDRES	MIAMI FL 33126 ST COKA, FANNY B 7401 NW 8TH STREET STE. I	DELETE	2.3 STREET ADDRES 2.4 CHY-SY-ZIP 3.1 TITLE		Change Addition	
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4. To hereby certify that the information supplied with this hing does not quality for the exemption stated in section 119.07(3)(i), Prohab statutes. 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 oath; the Lam 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Date Daylime Phone #