FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000039115 (8)**

1. Entity Name

ADVANCE COURIER SERVICES INC.

Principal Place of Business

13822 KENDALE LAKES DRIVE
MIAMI FL 33183

Mailing Address

13822 KENDALE LAKES DRIVE
MIAMI FL 33183

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/24/1994**

3a. Date of Last Report:

2. Principal Place of Business
21

2a. Mailing Address
26

4. FEI Number: **65-0494518.** ☐ Applied For ☐ Not Applicable

State Agent No.
22

State Agent No.
27

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☒ **$5.00** May Be Added to Fees

Zip 24 | County 25 | Zip 29 | County 30

8. The corporation has liability for corporate tax under § 220.02 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LAMAS, SUSANA
13822 KENDALE LAKES DRIVE
MIAMI FL 33183

10. Name and Address of New Registered Agent

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 Section 607.0502, 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. Such corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with and accept the duties of Section 607.0505, Florida Statutes.

SIGNATURE

Date

12. OFFICER AND DIRECTORS

D
LAMAS, SUSANA
13822 KENDALE LAKES DRIVE
MIAMI FL 33183

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is true, complete and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 appears in Block 12 or Block 13 above or on an attachment with an address.

SIGNATURE: SUSANA LAMAS 05/03/95 (305) 233-2345

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

043020 FP