FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000039115 (8)**

1. Corporation Name

ADVANCE COURIER SERVICES INC.

Principal Place of Business	Mailing Address
13822 KENDALE LAKES DRIVE MIAMI FL 33183	13822 KENDALE LAKES DRIVE MIAMI FL 33183

3. Date Incorporated or Qualified: **05/24/1994**
3a. Date of Last Report: **05/10/1995**
4. FEI Number: **65-0494518** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation is subject to, for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 1502 SW 8 TER
22 State, Apt. #, etc. U-806
23 City & State Miami, FL
24 Zip 33193 25 County DADE

2a. Mailing Address
26 P.O. Box 831206
27 State, Apt. #, etc.
28 City & State Miami, FL
29 Zip 33283 30 County DADE

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 Sections 607.0502 and 607.1916, 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 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 Section 607.0505, Florida Statutes.

SIGNATURE SUSANA LAMAS - PRESIDENT — 4-15-96
Signature of Registered Agent — Date

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	LAMAS, SUSANA	
STREET ADDRESS	13822 KENDALE LAKES DRIVE	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE	M	☐ DELETE
NAME	RAFAEL R. LAMAS	
STREET ADDRESS	1502 SW 80 TER.	
CITY-ST-ZIP	MIAMI, FL. 33193	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE	MANAGER	☐ Change ☒ Addition
1a NAME	RAFAEL R. LAMAS	
1b STREET ADDRESS	1502 SW 80 TER	
1c CITY-ST-ZIP	MIAMI, FL 33193	
2 TITLE		☐ Change ☐ Addition
2a NAME		
2b STREET ADDRESS		
2c CITY-ST-ZIP		
3 TITLE		☐ Change ☐ Addition
3a NAME		
3b STREET ADDRESS		
3c CITY-ST-ZIP		
4 TITLE		☐ Change ☐ Addition
4a NAME		
4b STREET ADDRESS		
4c CITY-ST-ZIP		
5 TITLE		☐ Change ☐ Addition
5a NAME		
5b STREET ADDRESS		
5c CITY-ST-ZIP		
6 TITLE		☐ Change ☐ Addition
6a NAME		
6b STREET ADDRESS		
6c CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing complies with the requirements of Section 607.0505, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 if changed, added or deleted.

SIGNATURE: — 4-15-96 (305)883-7295
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number