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 # POADOORADO7 (3)

1. Corporation Name NAME EXPRESS, INC. Principal Place of Business 10058 SPANISH ISLES BLVD. #13 BOCA RATON FL 33498 NAME EXPRESS, INC. Mailing Address 10058 SPANISH ISLES BLVD. #13 BOCA RATON FL 33498						
					3. Data Incorporated or Qualified 08/26/1994	3a. Date of Last Report 08/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0521861	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Added to Fees	
Zip	Country	Zip	Country	,	6. This corporation has liability for inte	
24	25 25 Name and Address of Curr				Florida Statutes Yes No 10. Name and Address of New Registered Agent	
М	CRAE, MITCHELL T		81	Name		
	55 GLADES ROAD		82	Street Add	iress (P.O. Box Number is Not Acceptable)	<u> </u>
	IITE 405 EAST		[]			
BO	OCA RATON FL 33431		63	j		
			84	City		FL 85 Zip Code
11. Pursuant	I to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the above	e-named cor	poration submits this statement for the pur	
office or agent 1:	registered agent, or both, in the Sta am familiar with, and accept the obt	ite of Florida. Such change was a igations of, Section 607.0505, Flo	uthorized by rida Statute:	y the corpora s.	poration submits this statement for the pur ation's board of directors. I hereby accept t	he appointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered agent and little if applicable OFFICERS AND DIRECTORS		Registered Age	uper erutangia ine	ulred when reinstating) ADDITIONS/CHANGES TO OFFICEF	DATE BS AND DIDECTORS IN 12
TILLE	D	DELETE	1,1 TITLE		ADDITIONS OF TAXABLE TO STRUCK	Change Addition
NAME	SCHWARTZ, KENNETH	1.2 NAME			•	
STREET ADDRESS	1	1.3 STREET ADDRES		ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33498		1.4 CITY-ST-ZIP		·	
TITLE		☐ DELETE :				Change Addition
NAME STREET AUDRESS	I .		2.2 NAME	ADDDCCC		
CITY-S1-ZIP		2.3 STAEET ADDRESS 2. 4 CITY-SF-ZIP				
Tille		DELETE 3.				Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADORESS		
CITY-S1-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP		Change Addition
NAME		DELETE .4.		1		C rustillo C vontanti
STREET ADDRESS			4.3 STREET	ł		
CHY ST-Z#			4.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	5'1 TITLE			Change Addition
NAME			52 NAME			
STREET ADDRESS	5	•	5.3 STREET			
CITY ST-2IP		DELETE	5.4 CITY - S 6.1 TITLE	DI+ZIF		Charge Addition
NAME			6:2 NAME			
STHEET ADDRESS			6.3 STREET	r Address		
0.79 67 700	1		E LOTTY O	or 300		

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 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; 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

May 14 1997 8:00am

Secretary of State