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**

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P94000091307 (6) DOCUMENT #

QUICK COURIER SERVICE, INC.

FILED Apr 30 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 110 D HIGHPOINT BLVD DELRAY BEACH FL 33445 DELRAY BEACH FL 33445-4001									
						3. Date Incorporated or Qualified 12/16/1994		te of Last 08/1996	•
2. Principal P	race of Business	2a. Mailing	Address		······································	4, FEI Number	1 0170		Applied For
21		26				65-0545593			ot Applicable
Suite, Apt.	#, etc.	Suite, 27	Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & Stat	······································	City & 28	State	Y	· · · · · · · · · · · · · · · · · · ·	Election Campaign Financing Trust Fund Contribution	□		0 May Be d to Fees
Zip	Country	Zip		Countr	У	8, This corporation has liability for			s. 199.032,
24	25 g. Name and Address of Cu	29	cent	30		Florida Statutes 10. Name and Address of New Re	Yes [
\	·	Hart Hadistelen Y	Rour	81	Name	10. Hame and Address of New He	gistorou r	igetit.	· · · · · · · · · · · · · · · · · · ·
	Denfreund, David) e jeffrey st			_			(-)		,
	CA RATON FL 33487			82	Street Add	dress (P.O. Box Number is Not Acceptal	DI 0)		
50.				83			· · · · · · · · · · · · · · · · · · ·		
				84	City			85 Zip	Code
				•	1	rporation submits this statement for the p	FL		
SIGNATURE	Signature, typed or prelied name of registere OFFICERS	d agent and title if applicat AND DIRECTORS		13.		uired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND		
TITLE	P		DELETE	1.1 TITLE	.			Change	Addition
NAME	YOUNG, ERIC			1.2 NAME					
STREET ADDRESS CITY+ST-ZIP	1100 HIGHPOINT BLVD. DELRAY BEACH FL			1.3 STREE	ET ADDRESS				
TITLE	DEDVI POTOTTE		DELETE	2.1 TITLE			···· ·	Change	Addition
NAME				2.2 NAME	:			_	
STREET ADDRESS				2.3 STREE	T ADDRESS				
CITY - S1 - ZIF				2.4 CITY	-ST-ZIP				
THLF			DELETE	3.1 TITLE	i			Change	Addition
NAME			*.	3 2 NAME	Į.				
STREET ADDRESS					ET ADDRESS				
CHY-SI-ZIF			DELETE	3.4. CITY 4.1 TITLE				Change	Addition
TITLE NAME			_ varie	4.1 tille 4.2 NAM	1			- John Ma	Pidowoll .
STHELT ADDRESS					ET ADDRESS				
CITY - ST-7IP			•	4.4 CITY-	1				
THLE			DELETE	5.1 TITLE				Change	Addition
NAMi				5.2 NAME	:				
STREET ADDRESS				5.3 STREE	ET ADDRESS				
CITY - ST - ZIP				5.4 CITY	ST-ZIP				
THEF			DELETE	6.1 TITLE				Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				63 STRE	et address				
CITY-ST-ZIF			····	6.4 CITY	ST-ZiP				

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: