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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000010853 (6)

Country

9. Name and Address of Current Registered Agent

25

PORTERFIELD, ERNEST 8

SALES EXPRESS, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Ζıp

Suite, Apt. #, etc.

26

27

28

29

2111 HIDDEN PINE LANE APOPKA FL 32712

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

22

23

24

Zip

2111 HIDDEN PINE LANE APOPKA FL 32712

FILED May 13 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/06/1995

4. FEI Number

Applied For

This corporation owes or has paid the current year Intangible

<u>59-3291759</u>

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

Personal Property Tax due Jurie 30.

10. Name and Address of New Registered Agent

Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ No

Yes

2111 HIDDEN PINE LANE APOPKA FL 32712			82	Street Address (P.O. Box Number is Not Acceptable)			
			83				
						T-2	
			84	City	FL 85	Zip (Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607,0502 and 607 egistered agent, or both in the State of Florida of familiar with, and accept the obligations of, S	1508, Florida Statutes Such change was au action 607.0505, Flori	the above thorized by ida Statutes	e-named o the corp s.	corporation submits this statement for the purpose of char location's board of directors. I hereby accept the appointment	nging its ient as	s registered registered
SIGNATURE	Signature, typed or pointed harve of registered agent and fille if a	AIGH	Contained And	at signal us	required when reinstating) DATE		
12.	OFFICERS AND DIRECTOR	~ · · · · · · · · · · · · · · · · · · ·	13.	nt eignature i	ADDITIONS/CHANGES TO OFFICERS AND DIR	FCTOR	S IN 12
TITLE	D	DELETE	1.1 TITLE			hange	Addition
NAME	PORTERFIELD, ERNEST B		1.2 NAME			•	
STREET ADDRESS	2111 HIDDEN PINE LANE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	APOPKA FL 32712		1.4 CITY - S	I - ZiP			
TITLE	D	DELETE	2.1 TITLE			Change	Addition (
NAME	PORTERFIELD, LOIS A		2.2 NAME				
STREET ADDRESS	2111 HIDDEN PINE LANE	235		ADDRESS			
CITY-ST-ZIP	APOPKA FL 32712		2.4 CITY -	ST - ZIP			
TITLE		DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY - 5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE)hange	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S	T - Z(P		·	
TITLE		☐ DELETE	5.1 TITLE		LIC	Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CiTY - S	T - Z(P			
TITLE		DELETE	6.1 TITLE			Chan g e	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S				
14. I hereby o	certify that the information supplied with this filin	a does not qualify for	the exemp	tion stated	d in Section 119.07(3)(i), Florida Statutes. I further certify t	nat 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.

Country

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