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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000078710 (7) DOCUMENT #

QUICK DISPATCH INT'L, INC.

Principal Place of Business	Mailing Address
8362 PINES BOULEVARD. SUITE 294	8362 PINES BOULEVARD. SUITE 2
PEMBROKE PINES FL 33024	PEMBROKE PINES FL 33024

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			T CADYSARI LIN SOLOT OFFICE ORBIT ORBIT DATE OF THE CONTROL OR THE TOTAL ORBIT (TOTAL SOLD ORBIT					
8362 PINES BOULEVARD. SUITE 294 8362 PINES BOULEVARD. SUITE 294								
	PINES FL 33024	PEMBROKE PI						
						DO NOT WRITE IN THIS SE	PACE	
	Diversity of D	····				3. Date Incorporated or Qualified 10/13/1995		
	Place of Business	2a. Mailing Add	ress			4. FEI Number		Applied For
21 Suite, Apt	I # etc	26 Suite Ant #	oto			65-0612324		Not Applicable
22 22		Suite, Apt. #				5. Certificate of Status Desired		Additional Required
						6. Election Campaign Financing	\$5.00	May Be
23 Zip	28				Trust Fund Contribution		to Fees	
24 Zip	Country 25	Zip		untry		8. This corporation owes or has paid the curre		
24]	9, Name and Address of Cu	29 29 Agent	30	тТ		Personal Property Tax due June 30. 10. Name and Address of New Registered Agency Agen		No No
171	HE LAW FIRM OF LAWRENCE			81 1	Name	10. Haune file warness of tres teafistered W	Agur.	
	43 ALMERIA AVENUE	- V OI IEGEE OFINID						
	ORAL GABLES FL 33134			82 8	Street Addres	ss (P.O. Box Number is Not Acceptable)		
				83	···			
				B4 (City	FL	85 Zip	Code
11. Pursuani	t to the provisions of Sections 607	.0502 and 607.1508, Flori	da Statutes, the	above-n	amed corpo	ration submits this statement for the purpose of o	hanging	its registered
agent. I	registered agent, or both, in the S am familiar with, and accept the o	state of Florida. Such char obligations of, Section 607	nge was authoriza 1.0505, Florida Sta	ed by that ututes.	e corporatio	on's board of directors. I hereby accept the appoi	ntment a	s registered
SIGNATURE		_			ionaliwa tao iira	J when reinstating) DATE		
12.		AND DIRECTORS	13.	co Agent s	sgratue required	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTO	RS IN 12
TITLE	PO	D	ELETE 1.11	TLE			Change	
NAME	SEDANO, JORGE L		1.21	IAME				_
STREET ADDRESS	8362 PINES BOULEVARD), SUITE 294	1.3 5	TREET ADI	DRESS			
CITY-ST-ZIP	PEMBROKE PINES FL 33	024		CITY-ST-Z	1			
TITLE		D	ELETE 2.11				Change	Addition
NAME			2.21	AME	ľ	_	_ •	_
STREET ADDRESS			2.3 5	TREET ADD	DRESS			
CITY-ST-ZIP			B B	CITY-ST-2	1			
TITLE		□ Di					Change	☐ Addition
NAME			321	IAME	ļ			
STREET ADDRESS			3.3 5	TREET ADI	DRESS			
CITY-ST-ZIP			3.4.	CITY-ST-Z	ZIP			
TITLE		DI					Change	☐ Addition
NAME			4.2	NAME				
STREET AODRESS			4.3 9	TREET ADO	ORESS			
CITY-ST-ZIP				aty-st-zi				
TITLE		OI					Change	Addition
NAME			5.2 M	AME		_	-	•
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CITY-ST-ZIP								
TITLE			540					
				ITY-S1-ZI			Change	Addition
		□ DI	ELETE 6.1 T	ITY-S1-ZI ITLE			Change	Addition
NAME		□ DI	6.1 T 6.2 N	ITY-S1-ZI ITLE IAME	IP .		Change	☐ Addition
		□ Dī	6.1 T 6.2 N 6.3 S	ITY-S1-ZI ITLE	DRESS		Change	Addition

14. I 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 an address.