## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)



**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

**DIVISION OF CORPORATIONS** 

FILED

97 SEP 16 PH 2: 28 SECRETARY OF STATE

DOCUMENT # P9600007493 (5)

N.Y. EXPRESSION INC. OF FLORIDA					LLAHASSEE, FLORIDA		
				·,• ·			
Principal Place of Business Mailing Address					I CONTROL IN TENDENIN CONTROL	BS161 06314 66144 18644 61616	IEIGS HUI INDI
4970 S.W. 52ND STREET 4970 S.W. \$2ND STREET SUITE 306 SUITE 306			REET				
DAVIE FL 33314 DAVIE FL 33314			14		DO NOT WRITE IN THIS SPACE		
		•			3. Date Incorporated or Qualified	d 3a. Date of Last	t Report
					01/22/1996		:
2. Principal Place of Business		2a. Mailing Address	2s. Mailing Address		4. FEI Number		Applied ≓or
21 4970 SW 52 ST.		26 SAME		65-063854.		Not Applicable	
Suite, Apt. #, etc.		<del></del> 1	Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional
22 SV/7£ 3//, 3/2. City & State		City & State			·	Required	
23 DAVIE FL		28		<u>.</u>	Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Zip	Country		8. This corporation owes or has	·	
24 <b>383</b> /	9. Name and Address of Currer	29	30		Personal Property Tax due Ju		No No
Alle		ir vahistatan Wäbut	81	Name	10. Name and Address of New I	Jahistatan Waaut	
NIEVES, MARIA DEL CARM 4970 S.W. 52ND STREET							
SUITE 306			82	Street Addr	ess (P.O. Box Number is Not Accept	able)	
DAVIE FL 33314			83				
	NE 1 E 333 14						
			84	City		FL. 85 Zi	ip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607,1508, Florida S	tatutes, the above	e-named corr	poration submits this statement for the		a its registered
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accord the oblig	of Florida, Such change v	was authorized by	the corporat	ion's board of directors. I hereby acc	ept the appointment	as registered
	in tannar was, and accept the obig	ations of, occitor 607.000	o, rionda statutes	٠,			1
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable.	(NOTE Registered Age	nt signature requir	ed whon reinstating)	DATE	
12.	, <del></del>	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		
TITLE	PRESIDENT	☐ DELETE	111MLE	/	MUSHTAR HUSSAIL	V VP LJ Chang	je 💢 Addition
NAME	MARIA DEL CARM	EN NIEVES	1.2 NAME	9	631 TURTLE RUN	8LVD. #722	<u> </u>
STREET ADDRESS	1152 GINGER C	IRCLE	1.3 STREET	ADDITESS	<del>-</del>		
CITY-ST-ZIP	DAVIE FEL DESZ	6 DELETE	1.4 CITY-S		ral spring, Fl 3	Chang	ge 🖊 Addition
TITLE	•	C) Dittele	• • • • • • • • • • • • • • • • • • • •	: 1	200002:	298502	
NAME			2.2 NAME		-09/19	/9701109-	-nos 🐪 📗
STREET ADDRESS			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		****1	35.00 ****)	165.00
CITY-ST-ZIP				1-21		☐ Chang	
NAME			3.2 NAME			C Supply	
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY - S				ļ
TITLE		☐ DELETE				Chang	ge Addition
NAME			4. 2 NAME			_	
STREET ADDRESS			4.3 STREFT	ADDRESS			
-CITY-ST-ZIP			4.4 CITY - S	I - ZIP			
TITLE		☐ DELETE	5.1 TITLE			Challe	pe 🔲 Addition
NAME			5.2 NAME			J'VY	
STREET ADDRESS			5.3 STREET	ADDRESS		08/	
CITY-\$T-ZIP			5.4 CITY - S	r-zip			
TITLE	-					∐ Chang	e Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP		1 . 50 6 (1 . 61)	6.4 CITY-S		13- Day Bay 440 07/07/0 Et 34 07 4		
14. I do hereb	by certify that the information supplied	d with this filing does not d	quality for the exer	mption stated	ı in Section 119.07(3)(i), Florida Statu	tes. I further certify th	at 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.

M.C. nieuras 11 OHIVE

9-15-97

(954)584-2540



M • U Expression Inc. of Florida 4970 S.W. 52nd St. Suite 311-322 Davie, FL 33314 Phone 305-584-2540 Fax 305-584-8016

September 15, 1997

Florida Department of State Division of Corporation Tallahassee, FL 32302-1500

RE: Corporation Annual Report

To whom it may concern:

Since we incorporated our business in 1996, we thought the only thing we have to file was our tax and our business tangible property tax. We had no idea that this Profit Corp. Annual Report has to be filed by June 30 of every year. We received this notice by accident and we never received the first one which I was told that it was sent to us in January. I think the reason being that the "suite No." was stated wrong; instead of suite 311/312 it was sent to suite 306.

Please accept our apology and we will never fail to file this report within the specified time of first notice. I hope and pray that you will pardon our delay, it would be of very great help to us at this time.

Thanking you in advance for your cooperation.

Sincerely yours,

MC Nieus

Maria del C. Nieves