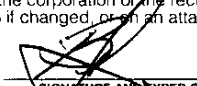


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90027 043 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1998 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96 000008307			
1. Corporation Name BAO Speedy Delivery Inc. 1420 NW 26 Avenue Miami, FL 33125			
Principal Place of Business 1420 NW 26 Avenue Miami, FL 33125		Mailing Address 881 SE 5 Place Hialeah, FL 33010	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 881 SE 5 Place	26 881 SE 5 Place	65-0652687	<input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State Hialeah, FL	City & State Hialeah, FL	Trust Fund Contribution	<input type="checkbox"/>
Zip 33010	Zip 33010	Country Dade	Country Dade
23	28	29	30
9. Name and Address of Current Registered Agent Berto Olivera 881 SE 5 Place Hialeah, FL 33010		10. Name and Address of New Registered Agent	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.		81 Name	
SIGNATURE		82 Street Address (P.O. Box Number is Not Acceptable)	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)		83	
DATE		84 City	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Berto Olivera, President	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	881 SE 5 Place	1.2 NAME	
STREET ADDRESS	Hialeah, FL 33010	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
14. I hereby certify that the information supplied with indicated on this annual report or supplemental officer or director of the corporation or the recorder Block 12 or Block 13 if changed, or on an attachment.			
SIGNATURE: 			

Dear Dept of Revenue,

The original annual report was not mailed to us so we are sending this one to renew in 1999. The fee we were told is 150

CR2E034 (5/98)