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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 26 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1	MENT # P9 on Name RA EXPRESS, INC.	6000012797 ((2)					11111 1882 1889
Principal Plac	ce of Business	Mailing Address	_			- -	AURU HARIA AURUS INDEN	1881 1881 1881
8405 NW 36 ST 202 -B MIAMM FL 33184 US		P.O. BOX 593115 Miami FL 33184 US	MIAMI FL 33184			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
2 Principal F	Place of Business	2a. Mailing Addres				02/05/1996 4. FEI Number		
21	\	26. Mailing Addres	5				 +	Applied For
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			65-0697931	69.7	Not Applicable 5 Additional
22		27	27			5. Certificate of Status Desired		Required
City & Stat	te	City & State				6. Election Campaign Financing Trust Fund Contribution		O May Be
į ZIP	Country	Zip	Cour	itry		8. This corporation owes or has paid to	the current year	Intangible
24	25	29	30			Personal Property Tax due June 30.	. Yes	□ No
9. Name and Address of Current Registered Agent					Name	10. Name and Address of New Regist	tered Agent	
	YES, MARY E			B1	Name			
1510 S.W. 139TH AVE. MIAMI FL 33184			1	82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
LEATH-	WII FE 55 10T		1	B3		100		
			8	84	City		85 Zi	ip Code
SIGNATURE	Signature, typed or pointed name of	n the state of Florida. Such change t the obligations of, Section 607.050 registered agent and little if applicable ICERS AND DIRECTORS	was authorized 05, Florida Statu (NOTE Registered	tes.			DATE	
TITLE	D	DELET	_	1.1 TITLE		ADDITIONS/CHANGES TO OFFICER:	S AND DIRECTO	
NAME	REYES, MARY E	_		1.2 NAME				, Длашки
STREET ADDRESS 1510 S.W. 139TH AVE.		E.	1.3 STR	1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33184	-	1.4 CITY					
TITLE		DELET	E 2.1 TITU	E			☐ Change	e 🔲 Addition
NAME			2.2 NAM	IE				
STREET ADDRESS			2.3 STRE	EET AD	DRESS			
CITY-ST-ZIP		T price	2. 4 CIT	_	ZIP	· · · · · · · · · · · · · · · · · · ·	·	
TITLE		₹] DELET					☐ Change	Addition
NAME Street adoress			3.2 NAM					
CITY-ST-ZIP	,		3.3 STRE					
TITLE		☐ DELET	3.4. CITY E 4.1 TITUS		ZIP		Change	Addition
NAME			4. 2 NAN				Gribige	Addition
STREET ADDRESS			4.3 STRE		DRESS			
CITY-ST-ZIP			4.4 CITY		ı			
TITLE		, DELET					☐ Change	Addition
NAME			5.2 NAM	E				
STREET ADDRESS			5.3 STRE	ET ADI	DRESS			
CITY-ST-ZIP		<u> </u>	5.4 CITY	- ST - Z	IP .			
TITLE	DELETE		E 6.1 TITLE	6.1 TITLE			☐ Change	Addition
NAME	1	()	6.2 NAM	E				
STREET ADDRESS			63 STRE	ET ADI	DRESS			
CITY-ST-ZIP		· > 1	64 City	- ST. 7	ip [

b4 UITY-SI-ZIP

In this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information have the same legal effect as if made under oath; that I am an or of vustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ment with an address. 14. I hereby certify that the information sindicated on this annual report or so officer or director of the corporation of Block 12 or Block 13 if changed or a