Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90112 031 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600054285

1. Corporation Name

EXPRESS CARGO OF SOUTH FLORIDA, INC.

Principal P ace	e of Business	Mailing Address				l infiliater ein inein arere autre	*****		41 16101 2111 1601		
300 S.W. 81ST TERRACE		300 S.W. 81ST TERRACE									
N. LAUDERDALE FL 33068		n. Lauderdale fl. 3306i}				DO NOT W	RITE IN THIS	SPACE			
						3 Date	Incorporated or Qualife		JOI AGE		
						1 -	26/1996	· <del>-</del>			
3 Principal P	lace of Business	2a, Mailing Address	_			4. FEI N				Applied For	
2. 1 moper race of Eddinosa		26				1	65-0676943			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.								\$8.75 Additional	
22		27				5. Certifcate of Status Desired			Fee Recuired		
City & State		City & State				6. Elect	6. Election Campaign Financing			\$5.00 May Be	
23		28				-	Trust Fund Contribution Added to Fees				
Zip	Country	Zip Cor		Country		8. This corporation owes the current year			ntangible —		
24	25	29	29 30				Persor at Property Tax.			Yes No	
	9. Name and Address of Curren	nt Registered Agent				10. Nam	e and Address of Nev	v Registered	Agent		
				81	Name					Į	
LOWRY, JEANANN				82 Street Ac dress (P.O. Box Number is Not Acceptable)				ptable)			
	SW 81 TERRACE							_			
N LA	AUDERDALE FL 33068			83							
				84	City				85 Ziç	Code	
				[	City			FL	_   "   "	, 0,220	
office c r	to the provisions of Sections 607.050 registered agent, or bo h, in the State im familiar with, and accept the obligation	e of Florida. Such change was a ations of, Section 607.0505, Fl	nuthorized orida Stat	by ti utes.	ne corporat	ion's board o	r cirectors. I hereby act	сері іне арро	ointment as	reg stered	
	Signature, typed or printed na ne of registered age			l Agent	signature requir	red when reinstatin		DATE			
12.	<u> </u>	NE DIRECTORS	13.			ADDIT	IONS/CHANGES TO	OFFICERS A	ND DIRECT ☐ Change		
TITLE	P			1.1 TITLE					Change	Addition	
NAME	BRESCIA, PATRICIA		1.2 N/	_						l	
STREET ADDRE 3S				1.3 STREET ADDRESS							
CITY-ST-ZIP	N. LAUDERDALE FL			14 CITY-ST-ZIP				<del></del>	Change	e 🔲 Addition	
TITLE	VP	☐ DELETE	2.1 TI							, Landidan	
NAMĘ	LOWRY, JEANANN			2.2 NAME						į	
STREET ADDRE 3S			2.3 STREET ADDRESS								
CITY-ST-ZIP	N LAUDERDALE FL		_	ITY-ST	-ZIP				☐ Change	Addition	
TITLE		☐ DELETE	3.1 TI						спану	Addition	
NAME			32 N	AME							
STREET ADDRESS			3.3 S	TREET	ADDRESS						
CITY-ST-ZIP				ITY-ST	-ZIP				☐ Chang	e Addition	
TITLE		DELETE	4.1 TI						chang	e Li Addition	
NAME			4. 2 N								
STREET ADDRESS			4.3 S	TREET	ADDRESS					]	
CITY-ST-ZIP				TY-ST-	ZIP				Псь	n D Addition	
TITLE		☐ DELETE	5.1 TI						Change	e	
NAME			5.2 N								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP				ITY-ST	ZIP					a Daddisa	
TITLE		☐ DELETE	61 TI						☐ Chang	e 🔲 Addition	
NAME			62 N							Ì	
STREET ADDRESS	1		6.3 \$	TREET	ADDRESS					Į.	

CITY-ST-ZIP 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 a nnual 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

OFFEE OR DIRECTOR