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

PROFIT CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000070345 (9)

MARTHAS EXPRESS, INC.

Mailing Address

## **FILED** May 15 1998 8:00am Secretary of State



3081 S.W. 7 : MIAMI FL 331		3081 S.W. 7 STREET MIAMI FL 33155			DO NOT WRITE IN THIS SPACE				
							3. Date incorporated or Qualified 08/22/1996		
2. Principal P	2a. Maili	2a. Mailing Address			4. FÉI Number		Applied For		
21			26	-			65-0688407	<b>—</b>	Vot Applicable
Suite, Apt. #, etc.			· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.					Additional
22			27				5. Certificate of Status Desired		Required
City & State			Fn ´	City & Stato			6. Election Campaign Financing \$5.00 May Be		
Zip Country			28				Trust Fund Contribution		
24	`			7ip Country			8. This corporation owes or has paid the current year Intangible		
9, Name and Address of Current F			29   Current Registered				Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent		
IIC.	ANAN, ENR	•			8	Name	10' MARIN SING WASHINGS OF HOM LIGHTED Y	Apist	
3081 S.W. 7TH STREET								-	
MIA			8:	Street A	Address (P.O. Box Number is Not Acceptable)				
4418		<del>-</del>			8:	3			
					<u> </u>	1 6:		r	
					84	1 1	FL	11	Code
11. Pursuant t	to the provisio	ns of Sections 6	07.0502 and 607.150	8, Florida Statu	ites, the abo	/e-named i		changing	its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.0508. 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.									
SIGNATURE 4	15/	care		,.			Abril-15-		
	Signifure, typed o	printed name of regis	lered agent and title if applica			gont signature i			
12. TITLE	PD	OFFICE	RS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND		
NAME		ENRIQUE		☐ DELETE	1.1 TITLE		Change Corporate	Change	Addition Addition
					1.2 NAME	- 1	Marthas Express		
STREET ADDRESS	181111 61 00166			1.3 STREET ADDRESS			4011.W_Flagler.St		
CITY-ST-ZIP TITLE	MICHINI I'L	00100		DELETE	1.4 CITY- 2.1 TITLE	S1-ZIP		Chance	Additor
NAME					2.7 TITLE		; <b>1</b> -	Change	☐ Addition
STREET ADDRESS						1 ADDRESS			
CITY-ST-ZIP					2.4 CITY				
TITLE				DELETE	3.1 TITLE	01-411		Change	Addition
NAME					3.2 NAME	1	`		
STREET ADDRESS					3.3 STREE	1 ADDRESS			
CITY-ST-ZIP	<del></del>	T			3.4 CITY	ST-ZIP			
TITLE				DELETE	4.1 TITLE			Change	Addition
NAME					4. 2 NAME				
STREET ADDRESS					4.3 STREE	I ADDRESS			
CITY-ST-ZIP		·	· · · · ·		4.4 CITY-	ST-ZIP			
TITLE				DELETE	5.1 7/TLE			Change	Addition
NAME					5.2 NAME				
STREET ADDRESS					5.3 STREE	F ADDRESS			
CITY-ST-ZIP				-	5.4 CiTY-	61-2IP			
TITLE				DELETE	6.1 71TLE			Change	Addition
NAME					6.2 NAME				
STREET ADDRESS					6.3 STREE	ADDRESS			
CITY_CT_7ID					0.4.0171/				

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 with an address.