2006 FOR PROFIT CORPORATION

Apr 03, 2006 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P96000070584 t. Entity Name NEWS EXPRESS, INC. Principal Place of Business Mailing Address PO BOX 55-7291 9821 N.W. 80TH AVE., BAY 5-K HIALEAH GARDENS, FL 33016 MIAMI, FL 33255 01132006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0689024 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZIMMERMAN, MICHAEL J DO NOT WRITE 13320 SW 128T STREET MIAMI, FL 33186 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIN FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ALDUNATE, CARLOS P STREET ADDRESS POST OFFICE BOX 55-7214. CITY-ST-ZIP MIAMI, FL 33255 TITLE LARCO, VICTOR MAME STREET ADDRESS 11378 SW 88TH LANE 見りいいいいいいけん 04/17/06-80014-015 150.00 CITY-ST-ZIP MIAMI, FL 33155 TALE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP KILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-702

12. I nereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oalh; that I am an officer or director of the corporation or the cedever or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11-changed, or on an attackment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS

CARIOS P. ALDUNATE 1-16-06 505-263

FILED