**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000079512

1. Corporation Name

D & C EXPRESS, INC.

## **FILED** Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90104 039 \*\*\*150.00



Principal Place of Business Mailing Address	L 1001160: 110 (1015 010) 0011 0011 0011 0011 1010 1010
16372 SW 66TH ST 16372 SW 66TH ST FT. LAUDERDALE FL 33331 FT. LAUDERDALE FL 33331 US	DO NOT WRITE IN THIS SPACE
03	3. Date Incorporated or Qualifed
	09/25/1996
Principal Place of Business     2a. Mailing Address	4. FEI Number Applied For
21 Maparty show DECERPIONS in 26	65-0696959 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.	5. Certificate of Status Desired
22 9664 Pines blu. 27	ree Required
City & State	6. Election Campaign Financing  Trust Fund Contribution  St.00 May Be Added to Fees
23 Provided - 1182 F1 28  Zip - Country - Zip - Country Zip	
24 33024 25 4 29 30	Personal Property Tax. ☐ Yes ☐ No
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
81	Name
DE LA HOZ, DELIA	Street Address (P.O. Box Number is Not Acceptable)
103/2 SW 001Ft 31	
FT. LAUDERDALE FL 33331	•
84	City 85 Zip Code
	FL  <u> </u>
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-office or registered agent, or both, in the State of Florida. Such change was authorized by the agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	named corporation submits this statement for the purpose of changing its registered ne corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	
	signature required when reinstating)  OATE
Signature, typed or printed name of registered agent and lattle if applicable. (NOTE: Registered Agent:  OFFICERS AND DIRECTORS  13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent and title if applicable.  12. OFFICERS AND DIRECTORS 13.  TITLE PD DELETE 1.1 TITLE	3/
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent:  12. OFFICERS AND DIRECTORS  13.  TITLE PD DE LA HOZ, DELIA  1.2 NAME  1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent:  12. OFFICERS AND DIRECTORS  13.  TITLE  NAME  DE LA HOZ, DELIA  12. NAME  STREET ADDRESS  16372 SW 66TH ST  1.3 STREET A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition  DDRESS
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Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent in 12.  12. OFFICERS AND DIRECTORS  13.  TITLE  PD  DE LA HOZ, DELIA  11. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  3.1 TITLE  NAME  3.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  DDRESS  ZIP  Change Addition  DDRESS  DDRESS  DDRESS  DDRESS  DDRESS  DDRESS  DDRESS
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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 officer or director of the Block 12 or Block 134 attachment with an address, with all other like empowered.

**SIGNATURE** 

REGUIRED