## 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 # P97000012214 (7)

## FILED Mar 26 1998 8:00am Secretary of State

TRINBAGO EXPRESS, INC.						
P	rincipal Plac	e of Business	Mailing Address		3 (00)((00) 310 (00)) (00)() 00)() <b>30</b> ()() <b>30</b> ()()() <b>30</b> ()()() <b>30</b> ()()() <b>30</b> ()()()()()()()()()()()()()()()()()()()	!
9717 WEST MCNAB ROAD 9717 WEST MCNAB ROAD				D	Ì	
TAMARAC FL 33321 TAMARAC FL 33321					DO NOT WRITE IN TI	HIS SPACE
			· ·		3. Date Incorporated or Qualified	NO OF PIOL
					02/05/1997	
<b></b> -		lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	Suite, Apt. #, etc.		26		U5-07/8993	Not Applicable
22	<del></del> 1		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	City & Stat	6	City & State		6. Election Campaign Financing	
23			28			\$5.00 May Be Added to Fees
Ì	Zip	Country	Zip	Country	Trust Fund Contribution  8. This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
24		25	29	30	Personal Property Tax due June 30.	Yes No far ou
		9, Name and Address of Curren	I Registered Agent		10. Name and Address of New Register	ed Agent
RAMRODOP, SARAH				81 Nam		
9717 WEST MCNAB ROAD				82 Street Add	frees (P.O. Box Number is Not Acceptable)	
	IA	MARAC FL 33321		83		
				84 City:		85 7in Codo
11	. Pursuant	to the previsions of Sections 607.050	2 and 607.1508, Florida Statut	es, the above-named cor	poration submits this statement for the purpos	e of changing its registered [*
	office or r agent. La	egistere/l/agent, or both, in the State im familie with Indiaclep/the obliga	of Florida. Such change was a ations of, Section 607,0505. Fla	authorized by the corpora orida Statutes.	poration submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as registered
	GNATURE	Sound	WINDE			į
		Signate c. typud or printed name of a gularica age		E: Registered Agent signature requi		
12	ile T	OFFICERS AND	DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition
	ME .	RAMROOP, SARAH		1.1 TITLE 1.2 NAME		ET CHANGE ET MODICION
	REET ADDRESS	9717 WEST MCNAB ROAD		1.3 STREET ADDRESS		
	IY-ST-ZIP	TAMARAC FL 33321		1.4 CITY-ST-ZIP		
TIT		V	☐ DELETE	21 TITLE	15 0 1100	Change  Addition
NA	ME	Maraj, Sheldon		22 NAME	An raid Shelalland	•
STI	reet address	9717 WEST MCNAB ROAD		2.3 STREET ADDRESS	ETTY OF MICINAL KO	
CIT	Y-ST-ZIP	TAMARAC FL 33321		2. 4 CITY-ST-ZIP	amarac, Fl 33321	
	LE	\$	☐ DELETE	3.1 TITLE	amiae wan Susan	Change
	ME	RAMJEAWAN, SUSAN		3.2 NAME	amae wan xixin	
	REET ADDRESS	9717 WEST MCNAB ROAD TAMARAC FL 33321		3.3 STREET ADDRESS	1944 NOO HIII GT	'
	Y-ST-ZIP LE	T T T	DELETE	3.4. CITY-ST-ZIP	JULIU 18 ( 1-1 3335)	Change Addition
NA		RAMROOP, LENON		4.1 TITLE 4.2 NAME	Damena, Lenan	Change
	REET ADDRESS	9717 WEST MCNAB ROAD		4.3 STREET ADDRESS	BUIL KIAL THIT G	
	Y-ST-ZIP	TAMARAC FL 33321		4.4 CITY-S1-ZIP	funrise, Fl 33351	
TIT		-	DELETE	5.1 TITLE	7 -4 0 1 DO 3 9 1	
NA				3.1 HHEE		Change Addition
	ME			5.2 NAME		Change Addition
	ŀ		DECEIE			Change Addition
STI	ME			5.2 NAME		Change Addition
STI	ME Reet address Y-ST-ZIP		☐ DELETE	5.2 NAME 5.3 STREET ADDRESS		Change Addition
STI	ME Reet address Y-St-Zip Le			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
STI CIT TITI NAI	ME Reet address Y-St-Zip Le			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	

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 suppliemental 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 of trustile 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.

CIONATURE.

MAK LAMBON

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