Mar 16, 1999 8:00 am Secretary of State 03-16-1999 90087 004 ***150.00

FILED

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 #	P97000024192
Corporation Name	. 0.0000=0=

ROMEN EXPRESS INTERNATIONAL REI INC.

Principal Place of Business Mailing Address									
171 NW 85 PL.		171 NW 85 PL.							
MIAMI FL 33126 MIAMI FL 33126				DO NOT WRITE IN T	DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed				
					03/18/1997				
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For		
	-NW 74hAVE	26 - SAN	NE		65-0735658		Not Applicable		
Suite, Apt. i		Suite, Apt. #, etc			5 Certificate of Status Desired		Additional		
22		27			J Schillene of Childs Besiden		Required		
City & State	Ann -	City & State			6 Election Campaign Financing		May Be		
23	AMI, FL	28			Trust Fund Contribution		d to Fees		
ر دروا	Country	Zip	_ Countr □	y	This corporation owes the current year	ir Intangible ☐ Yes	⊠ No		
24 331		 	<u>so </u>		Personal Property Tax 10. Name and Address of New Registe		2/1/0		
	9. Name and Address of Current	Registered Agent	81	Name		rea rigent			
80.4	AS ZAPATA, VICTOR D								
	NW 85 PL.		82	Stree	et Address (P.O. Box Number is Not Acceptable)				
	/II FL 33126		83	 					
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1	´					
			84	City		FL 85 Zi	p Code		
44 Divisiont	to the acquising of Sections 607 0502	not 607 1509 Floreda Statutos	the abov		d corporation submits this statement for the purpos	e of changing	its registered		
office or re	egistered agent for betti, in the State o	Florida. Such change was aut	thorized by	the corp	d corporation submits this statement for the purpos poration's board of directors. I hereby accept the a	ppointment as	registered		
agent. Lar	m familiar with sind accept the obligati			S	03/	1-199	,		
SIGNATURE	Signature, typed or printed name of logiste his age.		/a.s keg stered Agr	nt sidnittire	TAD (Entities white reinstalling)	<u> </u>			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIREC	TORS IN 12		
TITLE	DP	☐ DELETE	: 1 TITLE			☐ Chang	ge Addition		
NAME	ROJAS ZAPATA, VICTOR D		12 NAME						
STREET ADDRESS	171 NW 85 PL.		13 STREE	ET ADDRESS	s				
CITY-ST-ZIP	MIAMI FL 33126		14 CITY-	ST-ZiP					
TITLE	V	[] DELETE	21 TITLE			Chang	e Addition		
NAME	CADAVID, LUIS F		2 2 NAME						
STREET ADDRESS	160 NE 171ST ST		23 STREE	T ADDRESS	s				
CITY-ST-ZIP	MIAMI FL 33162		2.4015	STZP.	·				
TITLE	S	∑ DELE 1E	2,T			☐ Chang	ge Addition (
NAME	MENDÒZA FERNANDO		3.2 NAME				-		
STREET ADDRESS	171 NW-85 PLACE		3.3 STREE	ET ADDRESS	sį				
CITY-ST-ZIP	MIÁMI FL 33126	·	34 CITY			TI Char	no Addition		
TITLE	12	DELETE	4 1 TITLE			Chang	ge 🔲 Addition		
NAME	SERNA, JOHN J		4 2 NAME				ŀ		
STREET ADDRESS	5545 W. 24 AVE. #111		43 STRE	: ADDRESS	S				
CITY-ST-ZIP	-HIALEAH FL 33046		4.4 CITY-				e [] Addition		
TITLE		[] DELETE	5 1 TITLE			Chang	ge [] Acquion		
NAME:			5 2 NAME						
STREET ADDRESS			ĸ	ET ADDRESS			ļ		
CITY-ST-ZIP			54 CiTy			Chang	e Acdition		
TITLE		☐ DELETE	61 TITLE			□ chang	de Cliveranou		
NAME			6.2 NAME				ļ		
STREET ADDRESS			u	ET ADDRES	SS				
CITY-ST-71P			64 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 supplied 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 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.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT