### 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 # P97000048486

MARKET PLACE EXPRESS CORP.

# FILED May 19, 1999 8:00 am Secretary of State

05-19-1999 90024 001 \*2,100.00



						DENN DENN DID	<b>(</b> 4   <b>  1</b> 11    <b>1</b> 11    1	<b>   </b>
Principal Place of Business Mailing Address								
10261 WEST BR PLANTATION FL		10261 WEST BROWARD BLVD PLANTATION FL 33324		DO NOT WRITE	IN THIS S	PACE		
					3. Date Incorporated or Qualifed 06/02/1997			
Principal Place of Business     2a. Mailing Address				-	4. FEI Number		Apı	olied For
21 1001 S. Main ST 26					65-0809158		Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired		\$8.75 A	I
22 27					3. Certificate of Citates Decired		Fee Re	·
City & State City & State					6. Election Campaign Financing		\$5.00	
23 (U, LD WOOD 1- 28					Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip	Country		8. This corporation owes the current	-		€No
24 34	185  25 UJ	29 30	l		Personal Property Tax.  10. Name and Address of New Re			LINO
	9. Name and Address of Current	Registered Agent	81	Name	To. Name and Address of New Ne	gistered A	JO.11.	
COSTELLO, JAMES J JR								
10261 WEST BROARD BLVD PLANTATION FL 33324			82	Street Add	ress (P.O. Box Number is Not Acceptab	ile)		
			83			<del></del> -		
			84	City			85 Zip C	Code
				-	. <u> </u>	FL		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		DIRECTO Change	
TITLE	DP	☐ DELETE	1.1 TITLE	ĺ			Change	Addition
NAME	COSTELLO, JAMES J JR		1.2 NAME					ľ
STREET ADDRESS	10201 11201 0110111110 0010		1.3 STREET					
CITY-ST-ZIP	PLANTATION FL 33324	Clearer	1.4 CITY-S	T-ZIP			Change	Addition
TITLE	DV .	☐ DELETE	2.1 TITLE					
NAME	COOK, KEVIN C		2.2 NAME					
STREET ADDRESS	13030 NW 5TH ST		2.3 STREET					
CITY-ST-ZIP			2.4 CITY-5	ST-ZIP		<del></del>	Change	Addition
TITLE	OT LEDGE M	["] DECE IE	3.1 TITLE					
NAME	MILLER, JEREL M		3.2 NAME	r ADDOECO				
STREET ADDRESS	9830 SW 15TH DR.		3.3 STREET					
CITY-ST-ZIP	DAVIE FL 33324	☐ DELETE	3.4. CITY-S 4.1 TITLE	11-ZIP			Change	Addition
TITLE	OCCUPATION INVESTIGATION		4.1 IIILE				_ ,	_
NAME	COSTELLO, JAMES J SR			T A DODECC				1
STREET ADDRESS	6801 NW 6TH CT.		4.3 STREET					ļ
CITY-ST-ZIP	PLANTATION FL 33317	☐ DELETÉ	4.4 CITY-S 5.1 TITLE	1-ZIP			Change	Addition
TITLE		- Derest	5.2 NAME				_ ,	_
NAME			5.3 STREE	TADDRESS				
STREET ADORESS	UNESS)		5.4 CITY-S					
CITY-ST-ZIP		☐ DELETE	6.1 TITLE				Change	☐ Addition
TITLE		_ occerc	62 NAME				•	
NAME			6.3 STREE	TADDRESS				
SIRECI ADDRESS			64 CITY-S					
CITY-ST-ZIP			V 4 OH 1-3	1 - 411				

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, with all other like empowered.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954 423 8030