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 # P9700052465 (6)

RAPI EXPRESS, INC.

FILED Apr 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						-} - 1 Juditru ind idhii idai berk dank dani dana brib kidh endi bida bida bida bida bida bida bida bi	
12356 SW 947		12356 SW 94TH LANE					
MIAMI FL 3310	36	MIAMI FL 33186				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	\neg
						06/13/1997	
	lace of Business	2a. Mailing Address	2a. Mailing Address			4 FELNumber	\neg
21		26				65-0760888 Applied For	ble
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired Sa.75 Additional	
City & State	9	City & State				Fee Required 6. Election Campaign Financing \$5.00 May Be	
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Ζιρ	Country Zip		Cou	Country		8. This corporation owes or has paid the current year Intangible	\neg
24	25 29 30		30	Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent	
GIL, RENE ARMANDO				61	Name		- 1
12358 SW 94TH LANE				82	Street Addre	ddress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33186			ł	83			\dashv
				84	City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute.					the corporation	oration submits this statement for the purpose of changing its register on's board of directors. I hereby accept the appointment as registere	ed d
SIGNATURE		5			•		
Signature, typed or printed name of registered agent and title if applicable (NOTE: Regis				Ager	nt signature required		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	السين
TITLE	PSD OIL DENE ADMANDO	L3 OFFEIE	1.1 111			Change Addit	ion
NAME	AASTA GULA ATTI I AANT		1.2 NA				
STREET ADDRESS	MIAN EL DOLOG				ADDRESS		Į.
CITY-ST-ZIP TITLE		☐ DELETE	1.4 C11		- ZIP	☐ Change ☐ Addii	
NAME	VTD Brizuela, Miguel A	L Otter	2.1 111		ŀ	LJ Change LJ Addi	1011
	6590 SW 111TH ST		2.2 NAME 2.3 STREE		*******		
STREET ADDRESS	MIAMI FL 33156						
CITY-ST-ZIP TITLE	MIAMI FL 33136	DELETE			T-ZIP	☐ Change ☐ Addii	tion
NAME			3.1 1)1				
STREET ADDRESS			3.2 NA		ADDRESS		
CITY-ST-ZIP					-		
TITLE		DELETE	3.4. CITY- 4.1 TITLE		1-214	Change Addii	ion
NAME			4.2 N/			E Charge E radii	
STREET ADDRESS		* · · · · · · ·	2		ADDRESS		- 1
CITY-ST-ZIP			4.4 CITY-				
TITLE		☐ DELETE	5.1 TIT		-211	☐ Change ☐ Addit	ion
NAME			5.2 NA				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP	•		5.4 CII				
TITLE		DELETE	6.1 TIT		- £1F	Change Addit	ion
NAME			6.2 NA				
STREET ADDRESS					ADDRESS		- 1
•				STREET ADDRESS CITY-ST-ZIP			
44 41	· · · · · · · · · · · · · · · · · · ·		0.4 011	1-31	- FIL		

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 shanged, or on an attachment with an address.

SIGNATURE: ///

4-1-91

305-661-3227