COND NOTICE: CORPORATION WILL BE DISSOL DUNT DUE ON OR BEFORE 8/10/94: \$225 (IF DISSOLVED,	MINIMUM AMOUNT DUE TO REINSTATE: \$3/	pagelote
CORPORATION	FLORIDA DEPARTMENT OF STATE Jim Smith	
ANNUAL REPORT	Secretary of State	4
2001	DIVISION OF CORPORATIONS	FILED
A CO T		
OCUMENT# \$\mathcal{U}G_1000	1058539	01 APR -4 PN 2: 16
Corporation Name		OF ODETADY OF CTATE
	- Tu	SECRETARY OF STATE
DETAIL EXPRES	S INC.	TALLAHASSEE, FLORIDA
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aimig / icorosc	oipal Place of Business 9490 SW 72 ST	
9490 SW 72 ST	, ()	DO NOT WRITE IN THIS SPACE
MIAM) FC 33/17	MIAMI, FC 33/73	3. Date Incorporated or Qualified 3a. Date of Last Report
If above addresses are incorrect in any way, line through inco	prrect information and enter correction below. Principal Place of Business	4. FEI Number Applied For
Mailing Address 9430 SW 72 ST 26	GUGO SUS 72 ST	65-0765800 Not Applicable
7	Suite, Apt. #, etc.	5. Certificate of Status Desired 6. Election Campaign Eigeneing Trust
27		\$8.75 Additional Fee Required Fund Contribution
	Mami FC	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$5.00 May Be Added to Fees
70114	ip Country	8. This corporation has liability or intangible tax under S. 199.032,
33/73 25 29	33/17 30	Florida Statutes Yes No
9. Name and Address of Current Register	red Agent 81 Name 6	10. Name and Address of New Registered Agent
RINGTO GOMET		ess (P.O. Box Number is Not Acceptable)
NICHKUD COMOC	82 Street Addr	ess (P.O. Box Number is not Acceptable)
9490 \$W 72 ST	83 94	90 SW 72 ST
Santi #2 33/	7 3 84 City	
		L S Zip Code
70(7M1) (2 (2) 207 0700 and 607	1500 or Coations 617 0500 and 617 1508 Flori	de Statutes, the above-named comporation submits this statement
Pursuant to the provisions of Sections 607.0502 and 607.	1508 or Sections 617.0502 and 617.1508, Flori	da Statutes, the above-named corporation's board of directors.
Pursuant to the provisions of Sections 607.0502 and 607, for the purpose of changing its rehistered office or registered hereby accept the appointment as registered agent. I am	1508 or Sections 617.0502 and 617.1508, Flori	da Statutes, the above-named corporation's board of directors.
Pursuant to the provisions of Sections 607.0502 and 607, for the purpose of changing its rehistered office or registered hereby accept the appointment as registered agent. I am	1508 or Sections 617.0502 and 617.1508, Flori ed agent, or both, in the State of Florida. Such familiar with, and accept the obligations of, Sec include. (NOTE: Registered Agent signature require	da Statutes, the above-named corporation submits this statement change was authorized by the corporation's board of directors. stion 607.0505 or 617.0503, Florida Statutes.
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I. Pursuant to the provisions of Sections 607.0502 and 607. for the purpose of changing its rehistered office or registered. I hereby accept the appointment as registered agent. I am GNATURE Signature the Appointment as registered agent. I am OFFICER'S AND DIRECTO 2. OFFICER'S AND DIRECTO 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 1. TITLE 3. STREET ADDRESS 4. CITY-ST-ZIP	1508 or Sections 617.0502 and 617.1508, Floried agent, or both, in the State of Florida. Such a familiar with, and accept the obligations of, Sections (NOTE: Registered Agent signature require OFS) 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	da Statutes, the above-named corporation submits this statement change was authorized by the corporation's board of directors. Stion 607.0505 or 617.0503, Florida Statutes. CHANGES TO OFFICERS AND DIRECTORS IN 12 CHANGES TO OFFICERS AND DIRECTORS IN 12 65 600003992796—1 -04/11/01—01107—013 ****450.00 *****450.00
Pursuant to the provisions of Sections 607.0502 and 607. for the purpose of changing its rehistered office or registere. I hereby accept the appointment as registered agent. I am SNATURE SIGNATURE Signard for appointment as registered agent. I am OFFICER'S AND DIRECTOR. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1508 or Sections 617.0502 and 617.1508, Floried agent, or both, in the State of Florida. Such of familiar with, and accept the obligations of, Sections 617.0502 and 617.1508, Floried agent, or both, in the State of Florida. Such of familiar with, and accept the obligations of, Section 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	da Statutes, the above-named corporation submits this statement change was authorized by the corporation's board of directors. Stion 607,0505 or 617,0503, Florida Statutes. Changes To Officers and Directors in 12
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DETAIL EXPRESS INC. 9490 SW 72 ST MIAMI, FL 33173 (305) 270-7498

Monday, March 26, 2001

DIVISION OF CORPORATIONS PO BOX 6327 TALLAHASSEE, FL 32314

RE: UNIFORM BUSINESS REPORT P97000058539

We have not received our Uniform Business Report for the years 1999, 2000 and 2001. The mailing address on record is not correct. We did not intentionally filed late because we never received the report by the post office.

Please, accept our apology and we have attached the reports together with the check in the sum of \$450.00 for the 3 years; we will make sure our corporation uniform business perfort will be filed on time in the years ahead.

Thank you for your understanding and attention.

RICARDO GOMEZX

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