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 # P97000058985

1. Corporation Name

XPRESS LAB, INC.

Principal Place of Business

Mailing Address

9999 CW 46 6T 6TE 114

FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90051 034 ***150.00



2200 SW 16 ST STE 114 MIAMI FL 33145		MIAMI FL 33145			DO NOT WEITE IN THE COA	or.	
					DO NOT WRITE IN THIS SPA	<u></u>	
İ	·				3. Date Incorporated or Qualifed		
					07/07/1997	A	
Principal Place of Business Za: Mailing Address					4. FEI Number	Applied For	
21	·	26			65-0767171	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required		
22		27	1				
City & State	•	City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution		
Zip	Country Zip		_ Country		8. This corporation owes the current year Intangible		
24			30		Personal Property Tax. Yes No		
	9. Name and Address of Current	Registered Agent		1	10. Name and Address of New Registered Ager	<u>ıt</u>	
			81	Name			
	EJO, FERNANDO J		82 Street Addr		dress (P.O. Box Number is Not Acceptable)		
2200	SW 16 ST STE 114		Jan Street Add				
MIAN	AI FL 33145		83				
						T 7in Code	
	/- h 11		84	City	FL 85	Zip Code	
44 Dimensional	of the marketine of Sections 607 050	and 60 \$ 1508 Florida Statutes	the abov	l e-named o		ging its registered	
office or	egistered agent, or both in the State of	f Florida. Such change was aut	horized by	the corpo	corporation submits this statement for the purpose of chan rration's board of directors. I hereby accept the appointment	nt as registered	
agent. I a	m familia. With jand accept the attigat	ons of Selction 607.0505, Floring	Statutes	i.			
SIGNATURE		CH 1/2 1 1 1 1 1					
	Sign are, typed or printed make of registered state. OFFICE SRE AND	/// TJ	13.	nt signature re	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12	
12.		DELETE	1.1 TITLE	——Т		Change Addition	
TITLE	D THE SECOND SEC	· C Detter					
NAME	VALLEJO, FERNANDO	^ ·	1.2 NAME	ľ	FERNANDO V. VILLED Y	61502	
STREET ADDRESS 2451 BRICKELL AVE PENTHOUSE E				TADDRESS	2025 PAULEUNE T	1002	
CITY-ST-ZIP	MIAMI FL 33139		1.4 CITY-5	T-ZIP	41AM1, 12 33/27	Change Addition	
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STREET ADDRESS					·		
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TITLE	•	□ DELETE	6.1 TITLE			Change	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	TADDRESS			
CITY-ST-7IP	/		6.4 CITY-5	T-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify indicated on this annual report or supplemental annual report is true and ac officer or director of the corporation of the solver or trustee employed of Block 12 or Block 13 if changed, or on an attachment with an address, with palify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an exempt execute the report as required by Chapter 607. Florida Statutes; and that my name appears in

SIGNATURE: