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FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000059488 (1)

1. Corporation Name
PROTOTYPE EXPRESS, INC.



Principal Place of Business

Mailing Address

4000 NW 36 AVENUE
MIAMI FL 33142

4000 NW 36 AVENUE
MIAMI FL 33142

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/09/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

SMITH, LINDA M ESQ
11900 BISCAYNE BLVD SUITE 200
MIAMI FL 33181

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PD
Koch, Roger L
STREET ADDRESS 2137 Hibiscus Circle
CITY-ST-ZIP NORTH MIAMI FL 33181

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME STD
TRIPODO, ANTHONY J
STREET ADDRESS 1131 NE 97 STREET
CITY-ST-ZIP MIAMI SHORES FL 33138

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME D
MOUSSA, GEORGE
STREET ADDRESS 4760 SW 143 AVENUE
CITY-ST-ZIP MIAMI FL 33175

3.1 TITLE ☒ Change ☐ Addition

TITLE ☐ DELETE

NAME D
SALTER, STEVEN C
STREET ADDRESS 5785 SW 88 AVENUE
CITY-ST-ZIP COOPER CITY FL 33328

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME D
SKINNER, RAYMOND
STREET ADDRESS 2333 BRICKELL AVENUE #508
CITY-ST-ZIP MIAMI FL 33129

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

800002466988
-03/24/98--01088--016
***750.00

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.

SIGNATURE

ROGER KOCH

4-21-98

4-22-98

CR2E034 (10/97)