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FILED  
Apr 27 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 # P97000078026 (6)

1. Corporation Name

WHITEWING EXPRESS CORP.



Principal Place of Business

1401 S.W. 8TH STREET  
POMPANO BEACH FL 33069

Mailing Address

1401 S.W. 8TH STREET  
POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1997

4. FEI Number

65-0782694

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

2. Principal Place of Business

21 5535B NW 35TH Ave.  
Suite, Apt. #, etc.

22

City & State

23 Ft. Lauderdale, Fla

Zip

24 33309

Country

25 USA

2a. Mailing Address

26 5535B NW 35TH Ave.  
Suite, Apt. #, etc.

27

City & State

28 Ft. Lauderdale, Fla

Zip

29 33309

Country

30 USA

9. Name and Address of Current Registered Agent

EVANSEN, MARK  
1401 S.W. 8TH STREET  
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

EVANSEN, Mark

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

5535B NW 35TH Ave.

83

84

City Ft. Lauderdale

FL

85 Zip Code

33309

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

TITLE D  
NAME EVANSEN, MARK  
STREET ADDRESS 1401 S.W. 8TH STREET  
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE D  
NAME EVANSEN, STEPHANIE  
STREET ADDRESS 1401 S.W. 8TH STREET  
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME EVANSEN, Mark  
1.3 STREET ADDRESS 5535B NW 35TH Ave.  
1.4 CITY-ST-ZIP Ft. Lauderdale, Fla 33309

2.1 TITLE D  
2.2 NAME EVANSEN, Stephanie  
2.3 STREET ADDRESS 5535B NW 35TH Ave.  
2.4 CITY-ST-ZIP Ft. Lauderdale, Fla 33309

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  
6.4 CITY-ST-ZIP

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 *Mark Evansen*

*Stephanie Evansen* 954721-1000

CR2E034 (10/97)