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 # P97000092623 (2)

DADE EXPRESS, INC.

Mar 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 130 SW 67 COURT 130 SW 67 COURT **MIAMI FL 33144** MIAMI FL 33144 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/28/1997 2. Principal Place of Business 19328 NW /3 2a. Mailing Address Applied For 67 SW ct 130 Not Applicable Suite, Apt. #, etc. suite, Apt. #, etc. \$8.75 Additional Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be MIAMI Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible 3 3/44 USA 9. Name and Address of Current Registered Agent Personal Property Tax due June 30. Yes □ No 10. Name and Address of New Registered Agent FILINGS, INC. 3732 N.W. 16TH STREET 82 ot Acceptable) FT. LAUDERDALE FL 33311-4132 83 City 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 eacht, 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** Registered Agent eignature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE NAME MIRANDA, EDUARDO 1.2 NAME 130 SW 67 COURT STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIF **MIAMI FL 33144** 1.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 21 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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. or on an attachment with an address Block 12 or Block 13 if char

2/11/20