

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

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90143 013 ***150.00

DOCUMENT # P98000000232

1. Corporation Name
POWER COURIER, INC.



Principal Place of Business

10897 NW 7TH STREET
APT #13
MIAMI FL 33172

Mailing Address

10897 NW 7TH STREET
APT #13
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1998

4. FEI Number

65-0801587

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21 10897 N.W. 7st

2a. Mailing Address

26 10897 N.W. 7st

Suite, Apt. #, etc.

22 # 13

Suite, Apt. #, etc.

27 # 13

City & State

23 MIAMI Florida

City & State

28 MIAMI Florida

Zip

24 33172

Country USA

25 MIAMI Dade

Zip

29 33172

Country USA

30 MIAMI Dade

9. Name and Address of Current Registered Agent

VENTURA-TABARES, MARIA
10897 NW 7TH STREET
APT #13
MIAMI FL 33172

10. Name and Address of New Registered Agent

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

TITLE D
NAME VENTURA-TABARES, MARIA
STREET ADDRESS 10897 NW 7TH STREET
CITY-ST-ZIP MIAMI FL 33172

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P/S ☐ Change ☒ Addition

1.2 NAME VENTURA TABARES, MARIA

1.3 STREET ADDRESS 10897 N.W. 7th St

1.4 CITY-ST-ZIP MIAMI FL 33172

2.1 TITLE V/T ☐ Change ☒ Addition

2.2 NAME TABARES Humberto

2.3 STREET ADDRESS 10897 N.W. 7st

2.4 CITY-ST-ZIP MIAMI FI 33172

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 as an attachment with an address, with all other like empowered.

SIGNATURE:

Maria Ventura Tabares

4-26-99

305 221-8493

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0247751

CR2E034 (11/98)