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Secretary of State

04-24-2001 90028 033 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
2001



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000000552

1. Corporation Name

SUR EXPRESS CARGO CORP.

Principal Place of Business

5070 N.W. 116 CT.
MIAMI, FL 33178

Mailing Address

8462 S.W. 70 STREET
MIAMI, FL 33166

A0055026

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1998

2. Principal Place of Business

21 8462 N.W. 70 STREET

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FL 33166

Zip Country

24 33166

25

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

Country

30

4. FEI Number

65-0806303

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

9. Name and Address of Current Registered Agent

MATA, MARIA G.

9501 FOUNTAINBLEAU BLVD. #306
MIAMI, FL 33172

10. Name and Address of New Registered Agent

81 Name

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

5070 N.W. 116 COURT

83

84 City MIAMI

FL

85 Zip Code 33178

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 P/T/S ☐ DELETE

NAME MATA, MARIA G.

STREET ADDRESS 9501 FOUNTAINBLEAU BLVD. #306

CITY-ST-ZIP MIAMI, FL 33172

TITLE V ☐ DELETE

NAME SANCHEZ, JOHNNY R.

STREET ADDRESS 9501 FOUNTAINBLEAU BLVD. #306

CITY-ST-ZIP MIAMI, FL 33172

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

5070 N.W. 116 COURT

MIAMI, FL 33178

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

5070 N.W. 116 COURT

MIAMI, FL 33178

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIA G. MATA

04/11/01

305-436-9221

Date

Daytime Phone #

CR2E034 (11/98)