2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# P98000031103

Entity Name: XPRESS DELIVERY OF MIAMI, INC.

Current Principal Place of Business:

10930 W FLAGLER ST
SUITE 301
MIAMI, FL 33174

New Principal Place of Business:

31 NW 136TH CT
MIAMI, FL 33182

Current Mailing Address:

3899 SW 142 AVE.
MIAMI, FL 33175

New Mailing Address:

31 NW 136TH CT
MIAMI, FL 33182

FEI Number: 65-0829200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TRELLES, LUIS O
3899 SW 142 AVE.
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

TRELLES, LUIS O
31 NW 136TH CT
MIAMI, FL 33182 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 01/27/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TRELLES, HECTOR M
Address: 3899 SW 142 AVE
City-St-Zip: MIAMI, FL 33175

Title: VTD ( ) Delete
Name: TRELLES, LUIS O
Address: 3899 SW 142 AVE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TRELLES, HECTOR M
Address: 31 NW 136TH CT
City-St-Zip: MIAMI, FL 33182

Title: VTD (X) Change ( ) Addition
Name: TRELLES, LUIS O
Address: 31 NW 136 TH CT
City-St-Zip: MIAMI, FL 33182

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HECTOR M TRELLES PD 01/27/2005
Electronic Signature of Signing Officer or Director — Date