

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Aug 09, 1999 8:00 am
Secretary of State

08-09-1999 90005 008 ***550.00

DOCUMENT # **P98000062800**

1. Corporation Name

SOLYVENCA EXPRESS INC.

Principal Place of Business
5203 GRANADA BLVD.
CORAL GABLES FL 33146

Mailing Address
5203 GRANADA BLVD.
CORAL GABLES FL 33146

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/16/1998

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

65-0937483

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24

Country

25

Zip

29

Country

30

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTINEZ, JOSE A
11234 S.W. 62ND LANE
MIAMI FL 33173

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE

NAME **MARTINEZ, JOSE A**
STREET ADDRESS **11234 S.W. 62ND LANE**
CITY-ST-ZIP **MIAMI FL**

1.1 TITLE

D/P/

☐ Change

☐ Addition

NAME **MARTINEZ, JOSE F** ☒ DELETE

STREET ADDRESS **5203 GRANADA BLVD.**
CITY-ST-ZIP **CORAL GABLES FL**

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

NAME **MARTINEZ, JOSE F** ☒ DELETE

STREET ADDRESS **5203 GRANADA BLVD.**
CITY-ST-ZIP **CORAL GABLES FL**

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

TITLE **D** ☒ DELETE

NAME **SOLARES, MYRTHA**
STREET ADDRESS **5203 GRANADA BLVD.**
CITY-ST-ZIP **CORAL GABLES FL**

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

TITLE **D** ☐ DELETE

NAME **SOLARES, RODOLFO**
STREET ADDRESS **5203 GRANADA BLVD.**
CITY-ST-ZIP **CORAL GABLES FL**

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☒ Addition

NAME **SOLARES, RODOLFO** ☐ DELETE

STREET ADDRESS **5203 GRANADA BLVD.**
CITY-ST-ZIP **CORAL GABLES FL**

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

TITLE **D** ☐ DELETE

NAME **SOLARES, RODOLFO**
STREET ADDRESS **5203 GRANADA BLVD.**
CITY-ST-ZIP **CORAL GABLES FL**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE A MARTINEZ

PRESIDENT

7/30/99

305-799-2783

Date

Daytime Phone #

CR2E034 (5/99)