## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIE SEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P980000 6322 2

1999

**FILED** May 04, 2000 8:00 am Secretary of State

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1. Corporation Name	C- (		Í	
AGNO EXPLESS DNC.				
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Principal Place of Business 73101 TE	MACE	•		
(			DO NOT WRITE IN THE	S SPACE
TAMARAC, FC. 33321-5142			3. Unite Incorporated or Qualified 07/17/1998	
2. Principal Place of Business 2a. Mailing Address			4. FEI Number 65-0853469	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			Certificate of Status Desired. □ . □ .	\$8.75 Additional
City & State City & State			6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip Country	<b>28</b>	Country	8. This corporation owes or has paid the d	current year Intangible
25	29 3	0	Personal Property Fax due June 30.  10. Name and Address of New Registere	Yes X No
9. Name and Address of Curren	t Registered Agent	81 Name 1	0.4 - " 4 0.60	
		177	CBA CHAM BEYS	<u> </u>
1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			oss (PO. Box Number is Not Acceptable)	
ALBA CHAMBORS	1654	N.W. 73 na, Jerra	Carrier manufacture	
		84 City TAI	MANAC F	L 85 Zip Code 3332/
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation's submits this statement for the purpose of changing its registered of florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a magnitude with and accept the obligations of, Section 607,0505, Florida Statutes.				
SIGNATURE Signature, lyped or profess have all experience the	oubers	Bedistered Adent salvotros realen		1000
12. OFFICERS AN	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
MILE MANEY - D	DELETE .	1.1 TITLE	•	☐ Change ☐ Addition
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CITY-ST-ZIP		64 CHY-ST-ZIP	0	partification interesting
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 (9.07(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, of on an attac	chment with an address.		O4/25/2000 (9P) 9/2	30, 7089
SIGNATURE: _ [] i mod	o lours.		(01/29-000)	