

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90175 027 ***150.00

DOCUMENT # P98000084309

1. Corporation Name
SPRINT INTERNATIONAL EXPRESS, INC.

Principal Place of Business
6754 NW 72ND AVENUE
MIAMI FL 33166
7205 NW 68th AVE
Miami, FL 33166
Mailing Address
6754 NW 72ND AVENUE
MIAMI FL 33166



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/30/1998

4. FEI Number

65 0866 118

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

7. Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MATOS, ANTONIO

6754 NW 72ND AVENUE
MIAMI FL 33166
7205 NW 68th AVE
Miami, FL 33166

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 ☒ PRESIDENT ☐ DELETE
NAME MATOS, ANTONIO
STREET ADDRESS 6754 NW 72ND AVENUE
CITY-ST-ZIP MIAMI FL 33166
1112 WESTON RD
WESTON, FL 33320

TITLE ☐ DELETE
NAME ELIAS MIHAİLOS
STREET ADDRESS 125 SPARKILL AVE
CITY-ST-ZIP STATEN ISLAND, NY 10304

TITLE ☐ DELETE
NAME ANDREW W. POULOS
STREET ADDRESS 1278 84TH STREET
CITY-ST-ZIP BROOKLYN, NY 11228

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 7205 N.W. 68th ST. UNIT 1
1.4 CITY-ST-ZIP MIAMI FL 33166

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

4/17/99

Date

Daytime Phone #

CR2E034 (11/98)

0239360