2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P98000085575 **DOCUMENT #**

1. Entity Name

TITO EXPRESS, INC.

STREET ADDRESS

CITY-ST-ZIP



Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90328 038 ***150.00

Daytime Phone #

FILED

Principal Place of Business Mailing Address 151 CRANDON BLVD. #340 151 CRANDON BLVD. #340 MIAMI FL 33149 MIAMI FL 33149 2. Principal Place of Business 13450 SW 6251 3. Mailing Address SW 6257 13458 Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES D-104 0-104 City & States M(AM) 4. FEI Number Applied For 65-0867369 Not Applicable Country \$8.75 Additional *5*3183 5. Certificate of Status Desired 33183 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 0162 ROMERTO DIEZ. ROBERTO C Street Address (P.O. Box Number is Not Acceptable) 151 CRANDON BLVD. #340 13458 SW 6255 **MIAMI FL 33149** MIAMI 8. 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. I am familiar with, and accept the obligations of registered ag SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PUSO TITLE ☐ Delete TITLE Change DIEZ, ROBERTO C DIEZ, ROBERTO C NAME NAME 151 CRANDON BLVD. #340 13458 SW 625T APT 0-104 STREET ADDRESS STREET ADDRESS **MIAMI FL 33149** CITY-ST-ZIP CITY-ST-ZIP MIAMI 33103 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME

STREET ADDRESS

CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if

changed, or on an attachment with an address, with all offer like empor