

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

FILED

02 AUG 20 PM 1:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000095151

1. Entity Name

FLORIDA EXPRESS CUSTOMS BROKER CORPORATION

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

2550 N.W. 72 AVE.

3. Mailing Address

P.O. Box 226106

Suite, Apt. #, etc.

310

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0963663

Applied For

Not Applicable

Zip

33122

Country

US

Zip

33122

Country

US

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name **LICHENSTEIN, KAY A.**

Street Address (P.O. Box Number is Not Acceptable)

2550 NW 72 AVENUE # 310

City **MIAMI, FL**

Zip Code **33122**

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.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

January 1- May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

11. ADD OFFICERS AND DIRECTORS

TITLE **V**  
NAME **LICHENSTEIN, GUY**  
STREET ADDRESS **13500 N.W. 104 TERRACE**  
CITY-ST-ZIP **MIAMI, FL 33186**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

400007296204-2  
08/23/02-01009-001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

TITLE **PVDS**  
NAME **LICHENSTEIN, KAY A.**  
STREET ADDRESS **2550 NW 72 AVE # 310**  
CITY-ST-ZIP **MIAMI, FL 33122**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kay Lichtenstein*

08/06/02

305-593-5022

Date

Daytime Phone #

CR2E034B (12/01)

JS 8/20/02