

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 25 AM 10:29

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # S36236 (5)

1. Corporation Name

MABUHAY EXPRESS INT., INC.

Principal Place of Business

**145 NE 5TH ST.
MIAMI FL 33132**

Mailing Address

**145 NE 5TH ST.
MIAMI FL 33132**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/04/1991

3a. Date of Last Report

06/01/1994

4. FEI Number

65-0245044

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 6419-B Bird Road

Suite, Apt. #, etc.

2a. Mailing Address

26 6419-B Bird Road

Suite, Apt. #, etc.

22

27

City & State

23 Miami, Florida

City & State

28 Miami, Florida

Zip

24 33155

Country

Zip

29 33155

Country

30

9. Name and Address of Current Registered Agent

**DIXON, MONROE
6419-B BIRD ROAD
10
MIAMI FL 33155**

10. Name and Address of New Registered Agent

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 fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

**TITLE DV
NAME TARDEO, RESTITUTO, JR.
STREET ADDRESS 405 NW 136 ST.
CITY-ST-ZIP NO. MIAMI FL**

**TITLE DP
NAME DALMACIO, CONCEPCION
STREET ADDRESS 405 NW 136 ST
CITY-ST-ZIP NO MIAMI FL**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1 1 TITLE
1 2 NAME
1 3 STREET ADDRESS
1 4 CITY-ST-ZIP**

**2 1 TITLE
2 2 NAME
2 3 STREET ADDRESS
2 4 CITY-ST-ZIP**

**3 1 TITLE
3 2 NAME
3 3 STREET ADDRESS
3 4 CITY-ST-ZIP**

**4 1 TITLE
4 2 NAME
4 3 STREET ADDRESS
4 4 CITY-ST-ZIP**

**5 1 TITLE
5 2 NAME
5 3 STREET ADDRESS
5 4 CITY-ST-ZIP**

**6 1 TITLE
6 2 NAME
6 3 STREET ADDRESS
6 4 CITY-ST-ZIP**

☐ Change ☒ Addition

☐ Change ☒ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

4/20/95

305-685-9471

536236

12. Additional Officers and Directors

V

PIMENTEL, DANILO
405 NW 136 ST.
NO. MIAMI, FL 33168

S

ARELLANO, ROWENA
405 NW 136 ST.
NO. MIAMI, FL 33168

ASST. S

UMALI, RICARDO
405 NW 136 ST.
NO. MIAMI, FL 33168

T

JAEN, NORBERTO
405 NW 136 ST.
NO. MIAMI, FL 33168

ASST. T

ATIZADO, COLBY
405 NW 136 ST.
NO. MIAMI, FL 33168

PRESS RELATIONS

ACUNA, FERGIE
405 NW 136 ST.
NO. MIAMI, FL 33168

PRESS RELATIONS

DALMACIO, RUBEN
405 NW 136 ST.
NO. MIAMI, FL 33168