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Feb 27, 1999 8:00 am Secretary of State

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Mailing Address

7311 NW 12TH ST.

CENTRALIDERONZE FL 33126

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **\$48473**

1. Corporation Name

Principal Place of Business

7311 NW 12TH ST.

STE. #7

MIAMI LETTER EXPRESS CORP.

| MIAMI FL 33126 | | DEALCAUDEROALE FL 33126 | | | DO NOT WRITE IN THIS SPACE |
|--------------------------------|--|------------------------------------|--------------|------------------|--|
| US | | US | | | Date Incorporated or Qualifed |
| | | | | | 04/29/1991 |
| 2. Principal Place of Business | | 2a. Mailing Address | | | 4. FEI Number Applied For |
| 21 | | 26 7311 NW 12TH STREET | | REET | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired 5. Security Status Desired 5. Certificate of Status Desired 5. Security Status |
| 22 | | 27 SUITE # 7 | | | 5. Certificate of Status Desired Fee Required |
| City & State | | City & State | | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | | 28 MIAMI, FLOR | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Country | | 8. This corporation owes the current year Intangible |
| 24 | 25 | 29 33126 ₃₀ | 0.5 | 3.A. | Personal Property Tax. Yes No |
| <u></u> . | 9. Name and Address of Current | Registered Agent | | T | 10. Name and Address of New Registered Agent |
| DIEC | CED VICTOR | | 81 | Name | |
| - | SER, VICTOR | | 82 | Street A | Address (P.O. Box Number is Not Acceptable) |
| | NW 12TH ST. | | | | |
| STE. #7 | | | 83 | 1 | |
| MIAN | II FL 33126 | | 84 | City | FI 85 Zip Code |
| | 4 Footions 607 0503 | and CO7 1509 Elected Statutos | the abov | o named o | corporation submits this statement for the purpose of changing its registered |
| office or re | edistered agent or both in the State 0 | it Florida. Such change was auth | orizea di | ne corpo | ration's board of directors. I hereby accept the appointment as registered |
| agent. I ar | n familiar with, and accept the obligati | ons of, Section 607.0505, Florida | s Statute: | S. | |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if anolicable (NOTE: Re- | aistered Aae | ent signature re | equired when reinstating) DATE |
| 12. | OFFICERS AND | | 13. | an aignaidio i | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | D | ☐ DELETE | 1.1 TITLE | | Change Addi |
| NAME | RIESSER, VICTOR | | 1.2 NAME | | |
| STREET ADDRESS | 13061 N. KENDALL DRIVE | | 13.STRE | ET ADDRESS | 7311NW12TH STREET, SUITE 7 |
| | MIAMI FL | | 1.4 CITY- | | MIAMI, FLORIDA 33126. U.S.A. |
| CITY-ST-ZIP | VPS | · DELETE | 2.1 TITLE | J1-23 | ☐ Change ☐ Change |
| NAME | MARIA W. RIESSER | | 2.2 NAME | | |
| STREET ADDRESS | 7311 NW 12TH ST. | | | ET ADDRESS | 7311 NW 12TH STREET, SUITE 7 |
| | MIAMI FL 33126 | | 2.4 CITY- | | |
| CITY-ST-ZIP TITLE | WICHWITE 33120 | ☐ DELETE | 3.1 TITLE | 31-ZF | ☐ Change ☐ Addi |
| | | | 3.2 NAME | | |
| NAME | | | | ET ADDRESS | |
| STREET ADDRESS | | | 3.4. CfTY- | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 4.1 TITLE | U1-EAF | ☐ Change ☐ Addi |
| | | | 4. 2 NAME | . | _ · · · |
| NAME STREET ADDRESS | | | _ | T ADDRESS | |
| STREET ADDRESS | | | 4.4 CITY- | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 5.1 TITLE | 01-4IF | ☐ Change ☐ Addi |
| | | | 5.2 NAME | | . |
| NAME | | | | ET ADDRESS | |
| STREET ADDRESS | | | 5.4 CITY- | | · |
| CITY-ST-ZIP | | □ DELETE | 6.1 TITLE | | ☐ Change ☐ Addi |
| | | | 6.2 NAME | | , <u> </u> |
| NAME | | | | ET ADDRESS | |
| STREET ADDRESS | | | 64 CITY- | | · |
| CITY-ST-ZIP | | | 04 CHY- | 31-21 | |

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.