FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S79735

1. Corporate Name

My Express Int'l

Principal Place of Business / Mailing Address

8215 nw 64st #7
Miami, Fl. 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 9-11-91

3a. Date of Last Report:

2. Principal Place of Business
21 Same

2a. Mailing Address
26 Same

4. FEI Number: 65-0288928 — Applied For / Not Applicable

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

24 / 25 / 29 / 30

7. This corporation is owned by foreign interests as defined in s. 185.025, Florida Statutes ☐ Yes ☐ No

8. Name and Address of Current Registered Agent

Miguel Morello
6139 sw 147 pl.
Miami, Fl. 33193

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

12. OFFICERS AND DIRECTORS

TITLE	President
NAME	Miguel Morello
STREET ADDRESS	6139 sw 147 pl.
CITY-ST-ZIP	Miami, Fl 33193
TITLE	Secretary
NAME	Judy's Morello
STREET ADDRESS	6139 sw 147 pl.
CITY-ST-ZIP	Miami, Fl

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

400001482044
-05/10/95--01013--007
****200.00 ****200.00

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)(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.

SIGNATURE: Miguel Morello Miguel Morello 4-25-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date