## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

S79735

MY EXPRESS INTERNATIONAL CORP.

(4)

**FILED** 

May 05 1998 8:00am

Secretary of State

Mailing Address

8215 NW 64 MIAMI FL 331 US	· · · · · · · · · · · · · · · · · · ·				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  09/11/1991			
2. Principal Place of Business 2a. Mailing Address				9 we	4. FEI Number		h	pplied For
Suite, Apt.	Tale Do 107 HAS	26 3922 NV Suite, Apt. #, etc.		in me	65-0288928			ot Applicable
22	27				5. Certificate of Status Desired			Additional equired
City & State	City & State  28 Miami, Fl.  Country  Zip  Country				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 33	Country 25 US A.	29 33 172 30	8. This corporation owes or has paid Personal Property Tax due June 3	_		tangible		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
MORELLO, MIGUEL 81								
6139 SW 147TH PL.				82 Street Address (P.O. Box Number is Not Acceptable)				
MU	AMI FL 33193		83	<del></del>				
			84	City			-1 7:	Code
	-			,		FL 8		Code
11. Pursuant office or re	to the provisions of Sections 607,0502 a	and 607.1508, Florida Statutes, Florida Such change was aut	the abov	e-named corporation	oration submits this statement for the pu	rpose of cha	nging i	ts registered 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 pointed name of registered agent a	and little if applicable (NOTE: 8	tenistered An	ent signature require	d when reinstating)	DATÉ		<del></del>
12.	OFFICERS AND DIRECTORS 13.			err ogradie	ADDITIONS/CHANGES TO OFFICE		ECTO	RS IN 12
TITLE	P	DELETE	1.1 TITLE	T	-		Change	Addition
NAME	MORELLO, MIGUEL		1.2 NAME					12
STREET ADDRESS	6139 SW 147 PLACE		1.3 STREET	T ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY-5	ST-ZIP				
TITLE '	S NORTH O WILDVO	- E				LJ	Change	Addition
NAME -	MORELLO, YUDYS		2.2 NAME					
STREET ADDRESS	6139 SW 147 PLACE		ł	ADDRESS				}
CITY-ST-ZIP	MIAMI FL	☐ DEL <b>E</b> TE	2. 4 CITY- 3.1 TITLE	ST-ZIP		ш	Change	Addition
NAME		_ occa	3.2 NAME				Silange	Addition
STREET ADDRESS			8	ADDRESS				
CITY-ST-ZIP			3.4. CITY-					
TITLE		DELETE	4.1 TITLE	31 511			Change	Addition
NAME			4. 2 NAME					ł
STREET ADDRESS			4.3 STREET	,				İ
CITY-ST-ZIP	<u></u>		4.4 CITY - 9	ST - ZIP				
TITLE		☐ DELETE	51 TITLE				Change	☐ Addition
NAME			5.2 NAME					[
STREET ADDRESS			5.3 STREET	ADDRESS				]
CITY-ST-ZIP			5.4 CITY - 9	ST-ZIP				
TITLE		DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME	ĺ				ĺ
STREET ADDRESS			6.3 STREET					1
CITY-ST-ZIP			6.4 CITY - 9	ST-ZIP				

Thereby 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.

SIGNATURE:

4-24-98

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