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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # \$82206

	r micipal riace of business
i	330 SW 27 AVE

Secretary of State

Feb 15, 1999 8:00am

02-15-1999 90022 035 ***150.00

FILED

	n Name						
MAIL OR	DER SYSTEMS INC.						
17.5 (12. 01.		•			(1881) BAR (1811 BAR) BAR (1811 BAR) BAR (1811 BAR)	K ARAN BIRK BIRN B	IOH O(1) 1001
						CACALI RACI ELEM	HELL HEALT SEEK
Principal Place	of Business	Mailing Address				N BIUNI UNUN UNUN U	HEIT DIEH 1401
330 SW 27 AVE		6331 SAN VICENTE ST.			+		
STE 402	-	CORAL GABLES FL 33146					
MIAMI FL 33135	5	••••			DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualifed		
					09/24/1991		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	1 	plied For
21		26			65-0288403		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	
22		27			<u> </u>	Fee Re	· · · ·
City & State	e	City & State			6. Election Campaign Financing	\$5.00	· ·
23		28	Cou		Trust Fund Contribution	Added t	o rees
Zip	Country	Zip	Cou	nuy	8. This corporation owes the current year	Intangible Yes	⊡ No
24	25 9. Name and Address of Curre	29 29	30		Personal Property Tax. 10. Name and Address of New Registere		
	9. Name and Address of Curre	int Registered Agent	·- ·	81 Name	10. Haitie and Address of Her Registere	o Agent	
I OPI	ez, humberto o.						
	SAN VICENTE ST.			82 Street Addr	ess (P.O. Box Number is Not Acceptable)		
	AL GABLES FL 33146			83	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.867 (-513.24)	126 1614
					· · · · · · · · · · · · · · · · · · ·		
				84 City	A CONTROL OF THE STATE OF THE S	85 Zip C	Code *****
11 Durament	to the provisions of Sections 607.05	02 and 607 1508. Florida Statut	es the a	nove-named com	oration submits this statement for the purpose	of changing its	registered
office or n	egistered agent, or both, in the State	e of Florida. Such change was a	uthorized	by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	pointment as reg	gistered
agent. I ai	m familiar with, and accept the oblig	ations of, Section 607.0505, Flo	orida Stati	ites.			
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOTI	: Registered	Agent signature require	d when reinstating) DATE		—— I
12.		ND DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	SD	☐ DELETE	1.1 TII				
NAME	LOPEZ, HUMBERTO		3.1 1)	LE	A STATE OF STATE	☐ Change	Addition
STREET ADDRESS		_	1.2 NA		Activity.	Change	
O(T) CT 710	6331 SAN VICENTE ST.	_	1.2 N		A REAL PROPERTY.	☐ Change	
I CHT-SI-ZIP I	6331 SAN VICENTE ST. CORAL GABLES FL	_	1.2 NA 1.3 ST	ME	A MANAGE AND A MAN	☐ Change	
CITY-ST-ZIP TITLE	CORAL GABLES FL	DELETE	1.2 NA 1.3 ST	ME REET ADDRESS TY-ST-ZIP	Active.	☐ Change	
	CORAL GABLES FL PD	☐ DELETE	1.2 NA 1.3 ST 1.4 CT	ME REET ADDRESS IY-ST-ZIP	All Markets		Addition
TITLE NAME	CORAL GABLES FL PD LOPEZ, HUMBERTO	☐ DELETE	1.2 NA 1.3 ST 1.4 CF 2.1 TF 2.2 NA	ME REET ADDRESS IY-ST-ZIP	All Markets		Addition
TITLE NAME STREET ADDRESS	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST.	☐ DELETE	1.2 NA 1.3 ST 1.4 CF 2.1 TF 2.2 NA 2.3 ST	ME REET ADDRESS IY-ST-ZIP ILE ME	Action.		Addition
TITLE NAME	CORAL GABLES FL PD LOPEZ, HUMBERTO	☐ DELETE	1.2 NA 1.3 ST 1.4 CF 2.1 TF 2.2 NA 2.3 ST	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IT-ST-ZIP	Active.		Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD		1.2 NA 1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 C	ME REET ADDRESS IY- ST- ZIP LE ME REET ADDRESS IY- ST- ZIP LE	Active.	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL		1.2 NA 1.3 ST 1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 C 3.1 TF 3.2 NA	ME REET ADDRESS IY- ST- ZIP LE ME REET ADDRESS IY- ST- ZIP LE		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER		1.2 NA 1.3 ST 1.4 CI 2.1 TI' 2.2 NA 2.3 ST 2.4 C 3.1 TI' 3.2 NA 3.3 ST	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST		1.2 NA 1.3 ST 1.4 CI 2.1 TI' 2.2 NA 2.3 ST 2.4 C 3.1 TI' 3.2 NA 3.3 ST	ME REET ADDRESS IY- ST- ZIP LE ME REET ADDRESS IY- ST- ZIP LE ME REET ADDRESS IY- ST- ZIP REET ADDRESS IY- ST- ZIP		☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CC	ME REET ADDRESS TY-ST-ZIP LE		☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CF 4.1 TT 4.2 N.	ME REET ADDRESS TY-ST-ZIP LE		☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CF 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CF 4.1 TT 4.2 NA 4.3 ST	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS		☐ Change ☐ Change ☐ Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CF 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CF 4.1 TT 4.2 NA 4.3 ST 4.4 CF 5.1 TT	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS TY-ST-ZIP LE REET ADDRESS TY-ST-ZIP LE		☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CF 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CF 4.1 TT 4.2 NA 4.3 ST 4.4 CF	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS TY-ST-ZIP LE REET ADDRESS TY-ST-ZIP LE		☐ Change ☐ Change ☐ Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CC 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4. CC 4.1 TT 4.2 NA 4.3 ST 4.4 CC 5.1 TT 5.2 NA 5.3 ST	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS IY-ST-ZIP LE MME REET ADDRESS IY-ST-ZIP LE MME REET ADDRESS IY-ST-ZIP LE MME REET ADDRESS		☐ Change ☐ Change ☐ Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CC 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4. CC 4.1 TT 4. 2 N. 4.3 ST 4.4 CC 5.1 TT 5.2 NA 5.3 ST 5.4 CC	ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS ITY-ST-ZIP ILE ME REET ADDRESS TY-ST-ZIP ILE AME REET ADDRESS IY-ST-ZIP ILE MME REET ADDRESS IY-ST-ZIP ILE MME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP		☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
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 STREET ADDRESS STREET ADDRESS	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CC 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CC 4.1 TT 4.2 NA 4.3 ST 4.4 CC 5.1 TT 5.2 NA 5.3 ST 5.4 CC 6.1 TT	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE		☐ Change ☐ Change ☐ Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST CORAL GABLES FL 33146	☐ DELETE	1.2 NA 1.3 ST 1.4 CI 2.1 TI 2.2 NA 2.3 ST 2.4 CI 3.1 TI 3.2 NA 3.3 ST 3.4 CI 4.1 TI 4.2 NA 4.3 ST 4.4 CI 5.1 TI 5.2 NA 5.3 ST 5.4 CI 6.1 TI 6.2 NA	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE AME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME ME REET ADDRESS IY-ST-ZIP LE ME ME REET ADDRESS IY-ST-ZIP LE ME		☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	CORAL GABLES FL PD LOPEZ, HUMBERTO 6331 SAN VICENTE ST. CORAL GABLES FL VD LOPEZ, ALEXANDER 6331 SAN VICENTE ST	☐ DELETE	1.2 NA 1.3 ST 1.4 CI 2.1 TI 2.2 NA 2.3 ST 2.4 CC 3.1 TI 3.2 NA 3.3 ST 3.4 CI 4.1 TI 4.2 NA 4.3 ST 4.4 CI 5.1 TI 5.2 NA 5.3 ST 5.4 CI 6.1 TI 6.2 NA 6.3 ST	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE		☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition

14. 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.