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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V26644

(7)

BREVARD SAME-DAY DELIVERY, INC.

FILED									
May 09 1997 8:00am									
Secretary of State									

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Principal Place of Business Mailing Address							. LIEDIL BIIDIN JIDID BILIB DOMA DIDIL		11 <b>0 10</b> 12 <b>010</b> 11 1	JI 311 1891
4451 ENTERPRI	ISE CT		P O BOX 667 MELBOURNE FL 32902-0667				1			
BTE E										
MELBOURNE F	L 32902	US					2 Data language of a Cyclifford	lan Dal	e of Last R	
US							3. Date Incorporated or Qualified 04/07/1992		7/1996	ероп
2. Principal Place of Business			2a. Mailing Address			#4.646666			oplied For	
21	N/B	26	26] NA				<b>59-3123962</b> Not Applicable			
Suite, Apt.	#, etc.	Su Time 1	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional			
22		27					ļ		Fee Re	beriups
City & Stat	Θ		City & State			6. Election Campaign Financing \$5.00 May Be				
23			28			Trust Fund Contribution				
_	Zip Country		Zip Country			,	8. This corporation has liability for intangible tax under s. 199.032,			
24	25 9. Name and Address of Curr	29		30			Florida Statutes Yes No  10. Name and Address of New Registered Agent			
6/14	<del></del>	ent register	a Agent		81	Name , ]		gistered A	Beur	
	DWICK, KEN				٠'	Name N/A	<b>?</b>			
	WAYCROSS RD SW				82		ss (P.O. Box Number is Not Acceptab	ilo)		
PALI	M BAY FL 32908			Ĺ		ļ				
					83					
					84	City			<b>85</b> Zip	Code
						<u> </u>		FL		
office or agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the ob-	502 and 607. Ite of Florida. ligations of, Se	1508, Florida Stati Such change was action 607.0505, F	utes, the ab authorized Torida Stati	by tes	e-named corpo y the corporations.	oration submits this statement for the pon's board of directors. I hereby accept	ot the appo	intment as	s registered registered
SIGNATURE					. ,					
	Signature, typed or printed if time of registered				Agr	on signature require		DATE	DIDEOTOR	
12.	<del></del>	AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	D, CHADWICK, KEN		DELETE	1.1 10		-		L	Change	Addition
NAME 1	626 WAYCROSS RD SW			1.2 NA						
STREET ADDRESS	PALM BAY FL					I ADDRESS				
CITY-ST-ZIP	TALM DAT FL		T surre			\$1-7(P			100	T 4.430
TITLE	OOLE DONNA		LI DELETE	2.1 111		ļ		ι	Change	Addition
NAME	COLE, DONNA			2.2 NA						
STREET ADDRESS	4451 ENTERPRISE CT			2.3 \$1	RFLT	T ADDRESS	• .			
CITY-ST-ZIP	MELBOURNE FL		Therese	- ····		\$1-ZIP		<sub>1</sub>		F1 77.55
TITLE			DELETE	3.1 111					Change	Addition
NAME	İ			3.2 NA	ΜĒ	1				
STREET ADDRESS	]			3351	REFT	T ADDRESS				
CITY-ST-ZIP				3.4. CI	14-5	SI-2IP				···
TITLE			☐ DELETE	4.1 717	LE				Change	Addition
NAME				4. 2 N/	ME					
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CITY-ST-ZIP				4.4 C(	y - S	S1-7IP				
TITLE	İ		☐ DELETE	5.1 111	ιŧ				Change	Addition
NAME				5.2 NA	MI					
STREET ADDRESS				5.3 ST	REF	ADDRESS				
CITY-ST-ZIP	<u> </u>			5.4 CI	Y-S	ST - ZIF				
TITLE			DELETE	6110	į F				Change	Addition
NAME	No. of the Control of			6.2 NA	ME					
STREET ADDRESS	State of the state			6351	REE1	1 ADDRESS				

14. I do 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 an address.

4/20/67