## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

**DOCUMENT #** 

1. Corporation Name
COURIERS, INC.

## **FILED** May 01 1996 8:00am Secretary of State

STRAIT DEDER JOHN LOUIT OPERE INDI ALBER GLOTT DERET ALDER AFRIE JOH

Principal Place	of Business	Mailing Address	, , , , , , , , , , , , , , , , , , ,	·					
6375-4 RIVI JUPITER FI	ERWALK LANE . 33458	6375-4 RIVERWAL JUPITER FL 3345							
					3. Date lass regrated or Qualified	3a. Date	05/01/	1995	
2. Principal Pla	ce of Business	2a. Mailing Address 26			4. FEI Number 0344697			Applied For Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State	City & Stato		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Gountry 25	Zφ	Country 30		8. This corporation has liability for in				
24	g. Name and Address of Curren	[29] t Registered Agent	1301		10. Name and Address of New R		Agent		
	g. Name and Address of Correll	i negistered Agent	81	Name	10. Name and Address of New II	egistered	ABelli		
WHITE, CHARLES R L 535 E INDIANTOWN RD					ddress (P.O. Box Number is Not Acceptable)				
	R FL 33477		83						
			84	City		FL	85 Z	Zip Code	
11. Pursuant to	the provisions of Sections 607 0502	and 607 1508. Florida Stal	tutes the above-i	named cornor	ration submits this statement for the purp		encina its	registered office	
l or registera	ed <b>agent,</b> or both, in the State of Floric h, <b>and</b> accept the obligations of, Secti	la. Such change was autho	orized by the corp	oration's boa	rd of directors. I hereby accept the appo	pintment as	registere	od agent. I am	
SIGNATURE _	Signature, typod or printed name of registered agent i	end Alle if engage his	(NOTE: Registered Age:	at sinuat iro require	d when rejectation	DATE			
12.	_ OFFICERS AND		13.	N Degrada	ADDITIONS/CHANGES TO OFFI		DIRECT	ORS IN 12	
TITLE	0	DELETE	1. 1 TO LE			[	Change	Addition	
NAME	MANUEL, ROGER B		1.2 NAME						
STREET ADDRESS	6375-4 RIVERWALK LANE		13 STREET	ADDRESS					
CITY-ST-ZIP	JUPITER FL		1.4 C/TY - S	T-ZIP					
TITLE	MANUEL, DIANE P	DELETE	2.1 THLE			[	Change	Addition	
NAME	6375-4 RIVERWALK LANE		2.2 NAME	i					
STREET ADDRESS	JUPITER FL		2.3 STREET	ADDRESS					
CITY-ST-ZIP			2.4 CITY - S	T-ZIP			=====		
TITLE		DELETE	3 1 HILE			L	Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			ľ	ADDRESS					
CITY-ST-ZIP TITLE		DELETE	3.4 CITY - 5 4. 1 TITLE	1- ZIP		r	7 Change	Addition	
NAME		L) bett it	4. 130LC			L	-1 Outlings	[] Monitor	
STREET ADDRESS			4.3 STREET	ADDRESS				•	
CITY-ST-2IP			4.4 CITY - S						
TITLE		DELETE	5. 1 TITLE	***		]	Change	Addition	
NAME			5.2 NAME			•		-	
STREET ADDRESS			5.3 STREE1	ADDRESS					
CITY-ST-ZIP			5.4 CITY - S						
TITLE		DELETE	6. 1 TITLE			Ī	Change	Addition	
NAME			62 NAME						
STREET ADDRESS			6.3 \$TREET	ADDRESS					
CITY-ST-ZIP			6.4 CITY - S						
	certify that the information supplied w	vith this filing is voluntarily for	rolebool and doc	e not qualify f	or the exemption stated in Section 1191	77/31/W Ele	vida Stati	utoe I fudbor	

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 frustee 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.