

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

FILED
Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000061316 (2)
 1. Corporation Name
EXINCARGO, INC.



Principal Place of Business: **8213 NW 30TH TERRACE MIAMI FL 33122**
 Mailing Address: **8213 NW 30TH TERRACE MIAMI FL 33122-1913**

2. Principal Place of Business (21-24)
 2a. Mailing Address (25-28)

3. Date Incorporated or Qualified: **07/27/1995**
 3a. Date of Last Report: **05/01/1996**
 4. FEI Number: **65-0604762**
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing: \$5.00 May Be Added to Fees
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
GONZALEZ, TELL H
8213 NW 30TH TERRACE
MIAMI FL 33122

10. Name and Address of New Registered Agent (81-85)

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: _____ DATE: _____
 (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13.
TITLE	DP	1.1
NAME	GONZALEZ, TELL H	1.2
STREET ADDRESS	11175 SW 70TH AVENUE	1.3
CITY-ST-ZIP	MIAMI FL 33156	1.4
TITLE	D	2.1
NAME	GUTIERREZ, ALEJANDRO E	2.2
STREET ADDRESS	8213 NW 30TH TERRACE	2.3
CITY-ST-ZIP	MIAMI FL 33122	2.4
TITLE	D	3.1
NAME	TORBAR, ESTEBAN J	3.2
STREET ADDRESS	8213 NW 30TH TERRACE	3.3
CITY-ST-ZIP	MIAMI FL 33122	3.4
TITLE	VP	4.1
NAME	CURIEL, JOSE I	4.2
STREET ADDRESS	9805 NW 52 ST. #113	4.3
CITY-ST-ZIP	MIAMI FL 33178	4.4
TITLE	VP	5.1
NAME	GUINAN	5.2
STREET ADDRESS		5.3
CITY-ST-ZIP		5.4
TITLE		6.1
NAME		6.2
STREET ADDRESS		6.3
CITY-ST-ZIP		6.4

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
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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, on an attachment with an address.

SIGNATURE: _____ DATE: **1/27/97**

CR2E034 (9/96)