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Mar 06 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

DOCUMENT # P95000084450 (2)

1. Corporation Name
EXPRESS TERMINAL SERVICES, INC.



Principal Place of Business
2199 NW S RIVER DR
MIAMI FL 33125
US

Mailing Address
2945 NW 21 TERR
MIAMI FL 33142-7019
US

3. Date Incorporated or Qualified
11/03/1995

3a. Date of Last Report
03/15/1996

21	2. Principal Place of Business	2a. Mailing Address	4. FEI Number 65-0625824	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
22	Suite, Apt #, etc.	Suite, Apt #, etc.	5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
23	City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Zip	Country	29	Zip	Country
25	Country	29	Country	30	Country

9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
FRIEDHOFF, JOHN H 100 S.E. SECOND STREET 17TH FLOOR MIAMI FL 33131			81	Name	
			82	Street Address (P.O. Box Number is Not Acceptable)	
			83		
			84	City	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 _____
Sign and type or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	P/D
NAME	BABUN, JOSE	1.2 NAME	BABUN-SELMAN, JOSE
STREET ADDRESS	3160 NW 14TH ST	1.3 STREET ADDRESS	3160 NW 14 STREET
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI, FLORIDA 33125
TITLE	VPSD	2.1 TITLE	V/S/D
NAME	BABUN, JOSE JESUS	2.2 NAME	BABUN, JOSE JESUS
STREET ADDRESS	12711 NW 6TH ST	2.3 STREET ADDRESS	12711 NW 6 STREET
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI, FLORIDA 33182
TITLE	TRD	3.1 TITLE	V/T/D
NAME	BABUN, SARA	3.2 NAME	BABUN, SARA CRISTINA
STREET ADDRESS	9250 SW 69TH ST	3.3 STREET ADDRESS	9250 SW 69TH STREET
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI, FLORIDA 33173
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 on an attachment with an address.

SIGNATURE: *Jose Jesus Babun* **JOSE JESUS BABUN** Date: **02/18/97** Daytime Phone: **305-635-0496**

CR2E034 (9/96)