

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

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**May 01 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 # P96000050284 (4)**

1. Corporation Name  
**CARIBBEAN ISLAND EXPRESS CO. LTD.**



Principal Place of Business  
**2714 PONCE DE LEON BLVD.  
CORAL GABLES FL 33134**

Mailing Address  
**2714 PONCE DE LEON BLVD.  
CORAL GABLES FL 33134-6005**

21	2. Principal Place of Business	26	2a. Mailing Address
	<b>980 N. Federal Hwy</b>		<b>980 N. Federal Hwy</b>
	Suite, Apt. #, etc.		Suite, Apt. #, etc.
22	<b>Suite 206</b>	27	<b>Suite 206</b>
23	City & State	28	City & State
	<b>Boca Raton, FLA</b>		<b>Boca Raton, FLA</b>
24	Zip	29	Zip
	<b>33432</b>		<b>33432</b>
25	Country	30	Country
	<b>Palm Beach</b>		<b>Palm Beach</b>

3.	Date Incorporated or Qualified	3a.	Date of Last Report
	<b>06/12/1996</b>		
4.	FEI Number	Applied For	
	<b>65-0673770</b>	<input type="checkbox"/> Not Applicable	
5.	Certificate of Status Desired	<input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**REATEGUI, CARLOS A  
2714 PONCE DE LEON BLVD.  
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81	Name	<b>EDWIN R. JONAS III</b>	
82	Street Address (P.O. Box Number is Not Acceptable)	<b>980 N. FEDERAL HIGHWAY</b>	
83		<b>Suite 206</b>	
84	City	FL	85 Zip Code
	<b>Boca Raton</b>		<b>33432</b>

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 *[Signature]* DATE **4/25/97**

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>JONAS, EDWIN R III</b>	
STREET ADDRESS	<b>7403 N.W. 7TH STREET</b>	<b>A289 SABALLA LANE</b>
CITY-ST-ZIP	<b>MIAMI FL 33126</b>	<b>Boca Raton, FLA, 33434</b>
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2	NAME	
1.3	STREET ADDRESS	
1.4	CITY-ST-ZIP	
2.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2	NAME	
2.3	STREET ADDRESS	
2.4	CITY-ST-ZIP	
3.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2	NAME	
3.3	STREET ADDRESS	
3.4	CITY-ST-ZIP	
4.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2	NAME	
4.3	STREET ADDRESS	
4.4	CITY-ST-ZIP	
5.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2	NAME	
5.3	STREET ADDRESS	
5.4	CITY-ST-ZIP	
6.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2	NAME	
6.3	STREET ADDRESS	
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 *[Signature]* DATE **4/25/97** FILE NO. **561-883-3506**

CR2E034 (9/96)