


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

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F94000006387 (4)**

1. Corporation Name

SOUTHERN OVERSEAS EXPRESS LINE, INC.

Principal Place of Business

Mailing Address

**330 SHIPYARD BLVD.
WILMINGTON NC 28412**

**330 SHIPYARD BLVD.
WILMINGTON NC 28412**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/14/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 56-1874513	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DAMASIO, ANGELA C
1703 NORTHWEST 79TH AVENUE
MIAMI FL 33126**

81 Name **Jim O'Melia**
82 Street Address (P.O. Box Number is Not Acceptable) **8290 NW 14th Ave.**
83
84 City **Miami** **FL** **85** Zip Code **33126**

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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EMERSON, WILLIAM P JR.	1.2 NAME	
STREET ADDRESS	330 SHIPYARD BLVD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	WILMINGTON NC	1.4 CITY - ST - ZIP	
TITLE	VSD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUFFIN, PETER B JR.	2.2 NAME	
STREET ADDRESS	330 SHIPYARD BLVD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	WILMINGTON NC	2.4 CITY - ST - ZIP	
TITLE	VTD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUTCHENS, ROBERT F	3.2 NAME	
STREET ADDRESS	330 SHIPYARD BLVD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	WILMINGTON NC	3.4 CITY - ST - ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EGGELING, HANS J	4.2 NAME	
STREET ADDRESS	1000 SOUTH AVENUE PLAZA, STE. 111	4.3 STREET ADDRESS	
CITY - ST - ZIP	STATEN ISLAND NY	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARETSON, ROBERT B	5.2 NAME	
STREET ADDRESS	5757 W. CENTURY BLVD., STE 700	5.3 STREET ADDRESS	
CITY - ST - ZIP	LOS ANGELES CA	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I 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]

[Signature]

[Signature]

[Signature]

[Signature]

[Signature]

[Signature]

[Signature]

[Signature]

CR2E034 (10/97)