

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 14, 1999 8:00 am
Secretary of State
07-14-1999 90006 023 ***150.00

DOCUMENT # F97000006513
1. Corporation Name
AIR TIGER EXPRESS INC.



Principal Place of Business Mailing Address
1632-38 NW 82 AVENUE 1632-38 NW 82 AVENUE
FL 33126 MIAMI FL 33126

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/10/1997	
City & State		City & State		4. FEI Number	
Zip		Zip		95-4557848	
Country		Country		Applied For	
25		29		Not Applicable	
26		27		5. Certificate of Status Desired	
28		30		<input type="checkbox"/> \$8.75 Additional Fee Required	
29		31		6. Election Campaign Financing	
30		32		Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
31		33		8. This corporation owes the current year	
32		34		Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	
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9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MURTY, STEPHEN		81 Name	
777 BRICKELL AVE #1114		82 Street Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33131		83	
		84 City	
		FL 85 Zip Code	

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LING, JACK	1.2 NAME	
STREET ADDRESS	755 N. NASH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	EL SEGUNDO CA 90245	1.4 CITY-ST-ZIP	
TITLE	VC	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEE, JOHN	2.2 NAME	
STREET ADDRESS	755 N. NASH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	EL SEGUNDO CA 90245	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		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: _____ DATE: Jul 6/99 305-639-2800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (5/99)

58 1795-90006-23
F97000006513



AIR TIGER EXPRESS, INC.
1632-38 NW 82 AVENUE, MIAMI, FL 33126
TEL: (305) 639-2800 / FAX: (305) 715-7333

6 July, 1999

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

Dear Sir/Mad,

Re. Document # F97000006513

I am sorry to say that we never received payment notice from your office.
Therefore, waiving penalty requested.

Please find enclosed check with amount \$150.00 to pay for the Corporation
Annual Report of 1999.

Thanks for your kind attention and help.

Sincerely Yours,

A handwritten signature in black ink, appearing to read "David Fong". The signature is fluid and cursive, with a large, sweeping "D" and "F".

David Fong
General Manager