FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 26 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K91326 (4)

1. Corporation Name
INTERNATIONAL EXPRESS CARGO SERVICES, INC.

Principal Place of Business	Mailing Address
6932 NW 51 STREET MIAMI FL 33166 US	6932 NW 51 STREET MIAMI FL 33166 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/30/1989
3a. Date of Last Report: 06/16/1994

2. Principal Place of Business	2a. Mailing Address
21 6918 N.W. 51st Street	26 P.O. Box 526825
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Miami, Florida	28 City & State: Miami, Florida
24 Zip: 33166 25 Country: U.S.A.	29 Zip: 33152 30 Country: U.S.A.

4. FEI Number: 65-0121552 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $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	10. Name and Address of New Registered Agent
TRAVANO, DONNA 6932 NW 51 STREET MIAMI FL 33166	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 6918 N.W. 51st Street 83 84 City: Miami FL 85 Zip Code: 33166

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PST	11 TITLE		☒ Change ☐ Addition
NAME	TRAVANO, DONNA	12 NAME		
STREET ADDRESS	6932 NW 51 STREET	13 STREET ADDRESS	6918 N.W. 51st Street	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	Miami, Florida 33166	
TITLE	VP	21 TITLE		☒ Change ☐ Addition
NAME	BORIA, WALTER	22 NAME		
STREET ADDRESS	6932 NW 51 STREET	23 STREET ADDRESS	6918 N.W. 51st Street	
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	Miami, Florida 33166	
TITLE	VP	31 TITLE		☒ Change ☐ Addition
NAME	BORIA, JUAN	32 NAME		
STREET ADDRESS	6932 NW 51 STREET	33 STREET ADDRESS	6918 N.W. 51st Street	
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP	Miami, Florida 33166	
TITLE	D	41 TITLE		☒ Change ☐ Addition
NAME	TRAVANO, DONNA	42 NAME		
STREET ADDRESS	6932 NW 51 STREET	43 STREET ADDRESS	6918 N.W. 51st Street	
CITY-ST-ZIP	MIAMI FL	44 CITY-ST-ZIP	Miami, Florida 33166	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Donna Travano April 20, 1995 (305) 471-0666
SIGNATURE AND TYPED OR PRINTED NAME OF MORNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Donna Travano

0103435 CP