

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

FILED
Mar 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L53290 (7)
1. Corporation Name
SUPERBUS CHARTERS & TOURS INC.

Principal Place of Business 9100 N W 119 ST HIALEAH GARDEN FL 33016 US	Mailing Address P O BOX 2488 HIALEAH FL 33012 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1181 W 68 ST. Suite, Apt. #, etc. 22 HIALEAH City & State 23 FL Zip 24 33014 Country 25 USA		2a. Mailing Address 26 SAME AS ABOVE Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 02/27/1990	
		4. FEI Number 65-0179861		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		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

ALONSO, ESTHER CASTRO
6750 W. 11TH COURT
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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

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	
NAME	RODRIGUEZ, PEDRO G., JR.	1.2 NAME	
STREET ADDRESS	6750 W. 11TH COURT	1.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL	1.4 CITY - ST - ZIP	
TITLE	TD	2.1 TITLE	
NAME	RODRIGUEZ, RAUL ENRIQUE	2.2 NAME	
STREET ADDRESS	6750 W. 11TH COURT	2.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL	2.4 CITY - ST - ZIP	
TITLE	SD	3.1 TITLE	
NAME	ALONSO, JORGE LUIS	3.2 NAME	
STREET ADDRESS	6750 W. 11TH COURT	3.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL	3.4 CITY - ST - ZIP	
TITLE	VD	4.1 TITLE	
NAME	ALONSO, JUAN	4.2 NAME	
STREET ADDRESS	6750 W. 11TH COURT	4.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	
NAME	ALONSO, ESTHER CASTRO	5.2 NAME	
STREET ADDRESS	6750 W 11TH COURT	5.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	
NAME	ALONSO, WALTER	6.2 NAME	
STREET ADDRESS	6750 W 11 CT	6.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL	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: *Esther C. Alonso* 2/26/98 305 887-9264

CR2E034 (10/97)