SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE PROFIT Sandra B Mortham CORPORATION Secretary of State ANNUAL REPORT DIVISION OF CORPORATIONS 1996 (6)**DOCUMENT #** L61870 ADVANCE CARGO EXPRESS, INC. Mailing Address Principal Place of Business 20304 N.W. 34TH COURT 20304 N.W. 34TH COURT MIAMI FL 33056 MIAMI FL 33058 3a. Date of Last Report 3. Date Incorporated or Qualified US US 04/11/1995 04/01/1990 Applied For FEI Number Mailing Address Principal Place of Business Not Applicable 2. 65-0186195 26 \$8.75 Additional 21 Certificate of Status Desired Suite, Apt #, etc. Fee Required Suite, Apt. #, etc. 27 \$5.00 May Be 22 Election Campaign Financing City & State Added to Fees City & State Trust Fund Contribution 28 This corporation has liability for intangible tax under s 199 032 23 Country Country Yes No Zip Florida Statutes 30 29 10. Name and Address of New Registered Agent 25 24 Name and Address of Current Registered Agent 81 Name MOHAMMED, JINNAH Street Address (P.O. Box Number is Not Acceptable) 82 20304 N.W. 34TH COURT **MIAMI FL 33056** 83 Zip Code 85 84 City FL 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. Thereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signalists required when reinstating) SIGNATURE (36/8)Signature, typed or printed name of registered agent and trie if apper stire ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS Change Addition 12 DELETE 1.1 DISCE E034 TITLE 1.2 NAME MOHAMMED, JINNAH NAME 13 STREET ADDRESS 20304 N.W. 34TH COURT STREET ADDRESS 1.4 CHTY - ST - ZIP Change Adultion MIAM! FL CITY - ST - ZIP DELETE 2.1 TEU TITLE 2 2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY - \$1 - 2IP Change Addition CITY-ST-ZIP DELETE 3.1 TITLE TITLE 3 2 NAME NAME 33 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP Change Addition CITY-ST-ZIP DELETE 4 1 TiTLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP Change Addition CITY-ST-ZIP DELETE STRILE TITLE 5 2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP Change Addition CITY - ST - ZIP DELETE 61 TITLE TITLE 6.2 NAME NAME 6 3 STREET ADDRESS STREET ADDRESS 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)(k). Florida Statutes 1 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 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. MOHAMMED YINNA H

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Dayte & Phrese R