

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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AND  
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**95 APR 25 AM 11:05**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sarah B. Morfitt  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # M10604 (0)**

1. Corporation Name  
**CANTON EXPRESS, INC.**

Principal Place of Business      Mailing Address  
**5484 W. 16TH AVENUE      5484 W. 16TH AVENUE  
HALEAH FL 33012      HALEAH FL 33012**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**01/25/1985      04/20/1994**

4. FEI Number      Applied For  
**59-2491289      Not Applicable**

5. Certificate of Status Desired       **\$8.75 Additional  
Fee Required**

6. Election Campaign Financing       **\$5.00 May Be  
Trust Fund Contribution      Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes       Yes       No

2. Principal Place of Business      2a. Mailing Address  
21      26  
Suite, Apt. #, etc.      Suite, Apt. #, etc.  
22      27  
City & State      City & State  
23      28  
Zip      Country      Zip      Country  
24      25      29      30

9. Name and Address of Current Registered Agent  
**LUU, KHANH  
5484 W. 16TH AVENUE  
HALEAH 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      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      Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required when re-registering)      DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LUU, KHANH</b>	12 NAME	
STREET ADDRESS	<b>5484 W. 16TH AVE.</b>	13 STREET ADDRESS	
CITY - ST - ZIP	<b>HALEAH FL</b>	14 CITY - ST - ZIP	
TITLE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY - ST - ZIP		24 CITY - ST - ZIP	
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 110.07(3)(k), 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 checked, or on an attachment with an address.

**SIGNATURE:** X      **4/21/95**      **JAC-823-1316**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      (Date)      (Signature Number)