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

PROFIT CORPORATION **ANNUAL REPORT**

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Applied For

Fee Required

Not Applicable

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M42764

EXPRESS ENTERPRISES. INC.

Principal Place of Business Mailing Address 12395 8 ORANGE BLOSSOM TR 12385 S ORANGE BLOSSOM TRAIL ORLANDO FL 32837 ORLANDO FL 32837-6506 3. Date Incorporated or Qualified 3a. Date of Last Report 12/05/1986 06/20/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3031047 26 Suite, Apt. #, etc. Suite, Apt. #. etc \$8.75 Additional П 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing 23

\$5.00 May Be 28 Trust Fund Contribution Added to Fees Zin Country Zin Country 8. This corporation has liability for intangible tax under s. 199.032, 🔀 Yes 🔲 No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MCCURDY, MICHAEL B. BENJAMIN JAYLOR 8235 W ANNA GAIL LANE 82 D.O. Box Number is Not Acceptable) BLOSSOM LANE CRYSTAL RIVER FL 34429 R. 84

City WINTER - Concretio 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.

BENJAMIN A. TAYUR PRESIDENT auster SIGNATURE inted name of jege-tered agent and till 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELE IE Change Addition TITLE 1.1 TITLE D/P/S/T MCCURDY, MICHAEL B. 1.2 NAME NAME BENJAMIN A. TAYLOR 8235 W ANNA GAIL LANE 1.3 STREET ADDRESS STREET ADDRESS 2154 BLOSSOM LANE CRYSTAL RIVER FL WINTER PARK, FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition 21 1011 TITLE MCCURDY, SANDRA K. NAME 2.2 NAME 8235 W ANNA GAIL LANE STREET ADDRESS 2.3 STREET ADDRESS CRYSTAL RIVER FL CITY-ST-ZIP 2. 4 City - S1 - ZIP TITLE DELETE 3.1 TITLE Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. Crty-St-ZIP DELETE TITLE 4 1 TITLE Change Addit/on NAME 4 2 NAME STREET ADDRESS 4,3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 THLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do 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

6.4 CITY - ST - ZIP

4/24/97 (UAZ) 428-1431