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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000085852 (0)

AMERICAN COURIER WORLDWIDE SERVICES, INC.

Principal Place of Business

Mailing Address

FILED May 05 1997 8:00am Secretary of State



7253 N.W. 12TH STREET MIAMI FL 33126 US		P.O. BOX 523218 Miami FL 33152-3218 US			3. Date Incorporated or Qualified	3a. Date		
					12/15/1993	U5/U	1/1996	
	Place of Business	2a. Mailing Address	032	a	4. FEI Number 65-0476142		├ ──	Applied For
21 [430 Sulte, Apt.	NW 78 AUE	26 <i>P.O. BOX</i> 5 Suite, Apt. #, etc.			0070470142			Not Applicable
22	#, U (U.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State 23 MIAM, FLOCIDA		City & State 28 MIAMI, FLORIDA		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
24 33/2	6 25 USA	29 33126 3	Country 00 U	15A] Yes 🔲	No	rs. 199.032,
	9, Name and Address of Curren	I Registered Agent			10. Name and Address of New Re	gistered A	gent	
	RCIA, ESMERALDA		61	Name				
13535 S.W. 59TH TERRACE MIAMI FL 33183				82 Street Address (P.O. Box Number is Not Acceptable)				
MIA	MI FL 33103		83					
							1	
			84	City		FL	85 Zi	ip Code
SIGNATURE	Signature, typed or printed name of registered age			l s-gnalure requ	uited when reinstating)	DATE		
12.	OFFICERS ANI	D DIRECTORS DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	ERS AND	Chang	
NAME	CALDERON, LUIS Y		1.2 NAME	}		L	Onling	c [_] Audition
STREET ADDRESS	15015 S.W. 52ND LANE		1.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST	- ZIP				
TITLE	OUISDOO TOURAL	☐ D£L€1E	2 1 TITLE			I	Chang	e Addition
NAME	CUADROS, ZEDNIA V 15015 S.W. 52ND LANE		22 NAME					
STREET ADDRESS CITY-ST-ZIP	MIAMI FL		2.3 \$1RFET					
TITLE	ST	DELETE	2 4 C/TY-S' 3 1 TITLE				Chang	e Addition
NAME	CALDERON, CORAL M	_	3.2 NAMÉ				_ •	
STREET ADDRESS	15015 S.W. 52 LANE		3.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL		3.4. CITY - S	1-7 0			<u> </u>	
TITLE		[_] DELETE	4.1 1111.6			L	Chang	je [_] Addition
NAME STREET ADDRESS			4 2 NAME 4.3 STREET	ADDRESS	n ne water and the second			. , .
CITY-ST-ZIP			4.3 STREET		en e			*.
TITLE		☐ DELETE	5.1 TillE				Chang	ge [] Addition
NAME .			5.2 NAME	ļ				
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - ST	- ZIP				
TITLE		DELETE	6.1 TITLE			į.	Chang	ge [] Addition
NAME CTRCET ADDRESS			62 NAME	NDDDECO				
STREET ADDRESS			63 STREET					
CITY-ST-ZIP	I		6.4 DITY - ST	- 217				

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 change, or on an alternation with an address.

CICNATURE.

04/05/97