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

PROFIT CORPORATION ANNUAL REPORT

Corporation Name



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

18	190		
DOCUMI	ENT	#	Pg

P94000054702 (3)

AI I	EXPRESS	INTERNATIONAL.	INC.

Principal Place of Business Mailing Address 7311 NW 12TH STREET 7311 NW 12TH STREET STE #6 STF #6 MIAMI FL 33126 **MIAMI FL 33126** 3a. Date of Last Report 3. Date Incorporated or Qualified 07/22/1994 05/16/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0509426 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desire V 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ $Z_{(D)}$ Country 8. This corporation has liability for intangition tax under s 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PIEDRAHITA, EDGAR 82 Street Address (P.O. Box Number is Not Acceptable) 7311 NW 12TH STREET STE #6 83 **MIAMI FL 33126** City 84 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Flegistered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE ☐ DELETE 1.1 TITLE Change Addition ACUNA, JAIME H NAME 1.2 NAME CR2E034 AVENIDA 15 #123-61 OFC 708 STREET ADDRESS 1.3 STREET ADDRESS SANTAFE DE BOGATA, COLOMBIA CITY-ST-ZIP 1.4 CITY - ST- ZIP TITLE DELETE ☐ Change ☐ Addition 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE C DELETE Change 3 1 TITLE Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CHY-ST-ZIP TITLE DELETE 4 1 111LE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C+TY - ST - 7IP TILE DELETE 5. 1 THE Change Addition 600001840666 NAME 5.2 NAME -05/28/96--01030--026 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP ***208.75 TITLE []] DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7IP 6 4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is votentedly furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or suppliements' 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 comporation or the component of the comp

an address

SIGNATURE: "

oath; that I am an officer or director of the appears in Block 12 or Block 13 if change

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (BIGNATURE ANT

02-19-96 Defe

(305) - 471-7768

(12/95)