

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

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000092532 (8)
1. Corporation Name
FAST TRANSPORTATION SERVICES OF MIAMI, INC.



Principal Place of Business 2070 NW 79 AVE MIAMI FL 32126	Mailing Address 1893 W NEW HAVEN AVE BOX #119 W MELBOURNE FL 32904
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/20/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0545590	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
BOTERO, ROBERT 412 KELLY LANE #103 FT LAUDERDALE FL 33326				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	GROPPE, ROBERT	1.2 NAME	
STREET ADDRESS	8000 PINE NEEDLE LN	1.3 STREET ADDRESS	
CITY-ST-ZIP	W MELBOURNE FL 32904	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	FORELLE, MAURICE	2.2 NAME	
STREET ADDRESS	1694 ROYAL POINCIANA BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33326	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	BOTERO, ROBERT	3.2 NAME	
STREET ADDRESS	320 RACQUET CLUB RD #103	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33326	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	JORDAN, JOHN	4.2 NAME	
STREET ADDRESS	5316 MILLSTREAM DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST CLOUD FL 34771	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE:  JOHN JORDAN 4/17/98 407 34385499

CR2E034 (10/97)