SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P95000019412

1. Corporation Name
Express Baggage, Inc.

Principal Place of Business
Orlando, FL

Mailing Address
625 SW 46 Ave
Miami, FL 33014

2. Principal Place of Business
21 Orlando, FL
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 14708 Bayonne Rd
Suite, Apt #, etc
27
City & State
28 Orlando, FL
Zip 29 32832 Country 30 USA

3. Date Incorporated or Qualified: March 9, 1995
3a. Date of Last Report: N/A
4. FEI Number: 65-0572652 — Applied For / Not Applicable
5. Certificate of Status Desired ☑ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
Jose L. Baloyra
777 Brickell Avenue, Suite
Miami, FL 33131

10. Name and Address of New Registered Agent
81 Name: J. Raymond Marrero
82 Street Address (P.O. Box Number is Not Acceptable): 14708 Bayonne Road
83
84 City: Orlando FL 85 Zip Code: 32832

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: J. Ray Marrero — Date: 8/7/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Alfredo J. Cao, Jr. 1991 SW 33 Ct. Miami, FL 33145	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	J. Raymond Marrero Vice President 625 SW 46 Ave. Miami, FL 33014	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Jose A. Mola, Jr. 1421 San Benito Coral Gables, FL 33134	☑ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Andrew Hechavarria 15320 SW 72 St., Apt 12 Miami, FL 33193	☑ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Alfredo J. Cao, Jr. President / Secretary 2575 SW 27 Ave, Suite 32 Miami, FL 33133	☑ Change ☐ Addition
2 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President / Treasurer J. Raymond Marrero 14708 Bayonne Rd Orlando, FL 32832	☑ Change ☐ Addition
3 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
4 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
5 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
6 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	100001919151 -08/12/96--01041--018 ***233.75	☐ Change ☐ Addition

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 119.07(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 changed, or on an attachment with an address.

SIGNATURE: J. Ray Marrero — Date: 8/7/96 — Daytime Phone #: (407) 281-9316
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)