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May 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000067533 (5)

1. Corporation Name

CALYPSO CARGO EXPRESS CORP.

Principal Place of Business

8340 NW 58 ST.
MIAMI FL 33166

Mailing Address

8340 NW 58 ST.
MIAMI FL 33166-3409



3. Date Incorporated or Qualified

08/14/1996

3a. Date of Last Report

4. FEI Number

65-0704937

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

PRINZ, ADALBERTO
8340 NW 58 ST.
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name EDGAR LEWIS, Esq.
82 Street Address (P.O. Box Number is Not Acceptable)
200 S. Biscayne Blvd.
83 Suite 2000
84 City Miami FL 85 Zip Code 33131

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

4/29/97

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP
DPS PRINZ, ADALBERTO
8340 NW 58 ST.
MIAMI FL 33166

TITLE NAME STREET ADDRESS CITY-ST-ZIP
DV LACHAISE, CHRISTIAN
8340 NW 58 ST.
MIAMI FL 33166

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PRINZ, ADALBERTO
12 NAME 8340 NW 58 ST
13 STREET ADDRESS MIAMI, FL 33166

14 CITY-ST-ZIP

15 CITY-ST-ZIP

16 CITY-ST-ZIP

17 CITY-ST-ZIP

18 CITY-ST-ZIP

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 attached address.

SIGNATURE

SECRETARY OF STATE

4/29/97

CR2E034 (9/96)