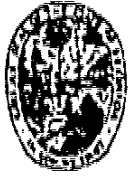


**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 12:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S22199 (1)

1. Corporation Name
CONTINENTAL EXPRESS, INC.

800001479808
-05/09/95--01012--006
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**C/O SHUTTS & BOWEN
201 S. BISCAYNE BLVD. 1800 MIAMI CENTER
MIAMI FL 33131** **C/O SHUTTS & BOWEN
201 S. BISCAYNE BLVD. 1800 MIAMI CENTER
MIAMI FL 33131**

3. Date incorporated or Created 3a. Date of Last Report
01/02/1991 **04/29/1994**

2. Principal Place of Business 2a. Mailing Address
21 10451 NW 28th St. **28 10451 NW 28th St.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 #101 **27 #101**
City & State City & State
23 Miami, FL **28 Miami, FL**
Zip Zip County County
24 33172 **29 33172** **30 DADE**

4. FEI Number Applied For
65-0323785 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
 \$5.00 May Be Added to Fees
6. Election Campaign Financing, Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. This corporation has liability for the job tax under S. 199.052, Florida Statutes YAP NO

8. Name and Address of Current Registered Agent

**CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVE.
1800 MIAMI CENTER
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 State
FL

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.

12. OFFICERS AND DIRECTORS

1 NAME: **MERA, JOSE D**
2 STREET ADDRESS: **GUSTAVO MEJIA RICART #78**
3 CITY-STATE: **SANTO DOMINGO, DR**
4 TITLE: **D**
5 NAME: **MERA, JOSE A.**
6 STREET ADDRESS: **GUSTAVO MEJIA RICART #78**
7 CITY-STATE: **SANTO DOMINGO, DR**
8 TITLE: **D**
9 NAME: **DE CASTRO, VIRGILIO POU**
10 STREET ADDRESS: **GUSTAVO MEJIA RICART #78**
11 CITY-STATE: **SANTO DOMINGO, DR**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 TITLE
15 NAME
16 STREET ADDRESS
17 CITY-STATE
18 TITLE
19 NAME
20 STREET ADDRESS
21 CITY-STATE
22 TITLE
23 NAME
24 STREET ADDRESS
25 CITY-STATE
26 TITLE
27 NAME
28 STREET ADDRESS
29 CITY-STATE
30 TITLE
31 NAME
32 STREET ADDRESS
33 CITY-STATE
34 TITLE
35 NAME
36 STREET ADDRESS
37 CITY-STATE
38 TITLE
39 NAME
40 STREET ADDRESS
41 CITY-STATE

eds
5/6/95

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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or an attachment with Block 13.

SIGNATURE: *Jose D. Mera*
SIGNATURE AND TYPE (IN PRINTED NAME) OF SIGNING OFFICER OR DIRECTOR
Jose D. Mera, President

May 1, 1995