FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V21295 (3)

1. Corporation Name
CARIBBEAN EXPRESS SERVICE, INC.

Principal Place of Business:
1700 NW 94TH AVENUE
MIAMI FL 33166

Mailing Address:
1700 NW 94TH AVENUE
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 6985 N.W. 50 ST.	2a. Mailing Address: 26 6985 N.W. 50 ST.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Miami FL.	City & State 28 Miami, FL.
Zip 24 33166 — County 25 Dade	Zip 29 33166 — County 30 Dade

3. Date Incorporated or Qualified: 03/13/1992
3a. Date of Last Report: 04/28/1994
4. FEI Number: 65-0319234 — 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 [X] No

9. Name and Address of Current Registered Agent

RODRIGUEZ, ERNESTO
1700 NW 94TH AVENUE
MIAMI FL 33166

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	RODRIGUEZ, ERNESTO	13046 SW 2ND TER	MIAMI FL
TD	MOLINA, JUAN	3502 TORREMOLINE AVE	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change / Addition
				[ ] Change [ ] Addition
TD	Jose Llach	9410 W. Flagler St.	~~Miami, Fl. 33174~~	[X] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] 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)(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: Ernesto Rodriguez — 5/1/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0186337 CP