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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 PM 1:36

DOCUMENT # V23352 (0)

1. Corporation Name
EXPRESS SURETY SERVICES, INC.

Principal Place of Business
5979 NW 151 ST.
SUITE 101
MIAMI LAKES FL 33014

Mailing Address
5979 NW 151 ST.
SUITE 101
MIAMI LAKES FL 33014

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/24/1992	3a. Date of Last Report: 04/20/1994
4. FEI Number: 65-0323106	Applied For / Not Applicable
5. Certificate of Status Desired [X]	$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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. # etc. 22 Suite 206	Suite, Apt. # etc. 27 Suite 206
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

HILTON, JOHN B.
5979 N.W. 151 STREET
SUITE 101
MIAMI LAKES FL 33014

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 Suite 206
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	DP
NAME	HILTON, JOHN B.
STREET ADDRESS	5979 NW 151 ST., #101
CITY-ST-ZIP	MIAMI LAKES FL
TITLE	D/VP/T
NAME	Nielson, Charles J.
STREET ADDRESS	5979 NW 151 St #205
CITY-ST-ZIP	Miami Lakes, FL
TITLE	S
NAME	Kupperman, Ona A
STREET ADDRESS	5979 NW 151 St #206
CITY-ST-ZIP	Miami Lakes, FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Suite 206	[X] Change [ ] Addition
2. TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [X] Addition
3. TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [X] 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		[ ] Change [ ] Addition

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 attachment with an address.

SIGNATURE: John B. Hilton President 1/10/94 305-827-9568

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0005326 CP