

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

PROFIT CORPORATION ANNUAL REPORT 1997 *93-97*

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

DOCUMENT # 128758 ()

1. Corporation Name
ROYAL EXPRESS SERVICE, INC.
6439 NW 82nd Ave
Miami, FL 33166

Principal Place of Business
6439 NW 82nd Ave
Miami, FL 33166

Mailing Address
Same

21	2. Principal Place of Business 6591 NW 82nd Ave	26	2a. Mailing Address
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State Miami, FL	28	City & State
24	Zip 33166	29	Zip
25	Country Dade	30	Country

REINSTATEMENT 93-97

3. Date Incorporated or Qualified 11/30/92	3a. Date of Last Report
4. FEI Number 65-0325410	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

VOGEL, ERIKA
410 W. PARK DRIVE
#206
MIAMI, FL 33172

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	300002261003--1 -18/07237-01095--007
84	City ***1410.00 PL *** 2410:00

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: *Erika Vogel* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	VP
NAME	ROQUE PEREZ	1.2 NAME	ROQUE PEREZ
STREET ADDRESS		1.3 STREET ADDRESS	6591 NW 82ND AVE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	MIAMI, FL 33166
TITLE		2.1 TITLE	P
NAME		2.2 NAME	AURELIO RODRIGUEZ
STREET ADDRESS		2.3 STREET ADDRESS	6591 NW 82ND AVE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI, FL 33166
TITLE		3.1 TITLE	S
NAME		3.2 NAME	ANDRES MENESES
STREET ADDRESS		3.3 STREET ADDRESS	6591 NW 82ND AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIAMI, FL 33166
TITLE		4.1 TITLE	T
NAME		4.2 NAME	ERIKA VOGEL
STREET ADDRESS		4.3 STREET ADDRESS	410 W. PARK DRIVE #206
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MIAMI, FL 33172
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 attachment with an address.

SIGNATURE: *Roque Perez* ROQUE PEREZ - VICE-PRESIDENT 4/30/97

CP2E034 (9/96)