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Mar 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 387668

(7)

1. Corporation Name
TRANS OLYMPIA TOURS, INC.

Principal Place of Business
20335 BISCAYNE BLVD #10
THE PROMENADE SHOPS
N MIAMI BCH. FL 33180

Mailing Address
20335 BISCAYNE BLVD #10
THE PROMENADE SHOPS
N MIAMI BCH. FL 33180-1532



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

3. Date Incorporated or Qualified
08/30/1971

3a. Date of Last Report
04/03/1996

4. FEI Number

59-1367676

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

9. Name and Address of Current Registered Agent

FLIAKOS, NICKOLAS
20335 BISCAYNE BLVD #10
NORTH MIAMI BCH FL 33180

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

Signature type for printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED
P	FLIAKOS, NICKOLAS	3500 MYSTIC PT DR. #1402	AVENTURA FL	☐
V	MALAVSKY, MORTON	4816 TAFT ST	HOLLYWOOD FL	☒
C	FLIAKOS, MARY	3500 MYSTIC PT DR. #1402	AVENTURA FL	☐
D	FLIAKOS, DIMITRIOS	3607 NE 24 AVE	FT LAUDERDALE FL	☒
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED
1.1				☐
1.2				☐
1.3				☐
1.4				☐
2.1				☐
2.2				☐
2.3				☐
2.4				☐
3.1				☐
3.2				☐
3.3				☐
3.4				☐
4.1				☐
4.2				☐
4.3				☐
4.4				☐
5.1				☐
5.2				☐
5.3				☐
5.4				☐
6.1				☐
6.2				☐
6.3				☐
6.4				☐

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0244852

CR2E034 (9/96)