FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
05-06-2002 90143 018 ***150.00

DOCUMENT # 461880

1. Entity Name
AIRTOURS VACATIONS, INC.

DO NOT WRITE IN THIS SPACE

648032

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2. Principal Place of Business	3. Mailing Address
220 CONGRESS PARK DR	
Suite, Apt. #, etc.: SUITE 300	Suite, Apt. #, etc.
City & State: DELRAY BEACH FL	City & State
Zip: 33445 Country: USA	Zip Country

4. FEI Number: 59-1559049 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: CT CORPORATION SYSTEMS

Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND ROAD

City: PLANTATION FL Zip Code: 33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

January 1 - May 1: Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CHAIRMAN
NAME	JOHN M. BLOODWORTH
STREET ADDRESS	220 CONGRESS PARK DRIVE
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	VP
NAME	HERBERT C. KELSON
STREET ADDRESS	220 CONGRESS PARK DRIVE
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	VPDS
NAME	PATRICK DOYLE
STREET ADDRESS	220 CONGRESS PARK DRIVE
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	VPAS
NAME	GEORGE DELPINO
STREET ADDRESS	220 CONGRESS PARK DRIVE
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	VPAS
NAME	ROBERT J MARAIST
STREET ADDRESS	220 CONGRESS PARK DRIVE
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	P
NAME	JOHN PRYZWARA
STREET ADDRESS	7616 LBJ FREEWAY SUITE 524
CITY-ST-ZIP	DALLAS TX 75251

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CR2E034B (12/01)

13. I 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert J Marait Robert J MARAIST 4/24/02 (561) 266 0860
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #