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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 697072

(7)

SUN WORLD TRAVEL, INC.

FILED
May 05 1998 8:00am
Secretary of State



Principal Pla	ice of Business	Mailing Address	Mailing Address						
	NNESSEE STREET		1120 E TENNESSEE STREET						
TALLLAHAS	SSEE FL 32308	TALLLAHASSEE FL 3	2308				DO NOT WRITE IN THIS	S SPACE	
						3.	Date Incorporated or Qualified		
							07/31/1981		
2. Principal	Place of Business	2a. Mailing Address		-		4.	FEI Number	A	pplied For
21		26				59-2118255			lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc				5	Certificate of Status Desired		Additional
22		27					- Continued of Clarks Booked	Fee R	Required
, City & Sta	ate	City & State				6. Election Campaign Financing \$5.00 May Be			
23	·	28	T Cours			 _	Trust Fund Contribution		to Fees
Zip	Country	Zip	Count	try		8.	This corporation owes or has paid the c		ntangible No
24	25 9. Name and Address of Curre	29 Agent	30			10	Personal Property Tax due June 30. Name and Address of New Registerer		☐ INO
		B1 Name							
	RAMACHE, JOANNE 1288 CITATION TRAIL								
	ALLAHASSEE FL 32308] 6	2	Street Addre	ess (F	P.O. Box Number is Not Acceptable)		
1.	ALLAMASSEE FE SESSO		e	3					
			8	4	City		F	85 Zip	Code
11 Dureugo	at to the provisions of Sections 607.060	12 and 607 1508 Florida Ste	tutos tho abr	Jue-	named corn	ratio			its registered
office or	registered agent, or both, in the State	of Florida. Such change w	as authorized	by I	the corporation	on's t	on submits this statement for the purpose board of directors. I hereby accept the ap	opointment a	s registered
agent. I	am familiar with, and accept the oblig	pations of, Section 607.0505	, Fiorida Statut	les.					
SIGNATURE	Signature, typed or printed name of registered ag	ant and it is it any heardo	NOTE Registered A	Acony	socialize require	d wher	n reinstaling) DATE		
12.		ID DIRECTORS	13.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTO	RS IN 12
TITLE	Vs	☐ DELETE	1.1 TiTU	E				Change	Addition
NAME	GAMACHE, GILLES		1.2 NAM	IE					
STREET ADDRESS	3269 CITATION TRAIL		1.3 S1RE	FTA	NDDRESS				
CITY-ST-ZIP	TALLAHASSEE, FL 00000		1.4 City	- \$1	- 218				
TITLE	PVT	☐ DELETE	2.1 TITL	E				Change	Addition
NAME	GAMACHE, JOANNE		2.2 NAM	ΙĚ					
STREET ADDRESS			2.3 STRE	ET Á	ÓDRESS		•		
CITY-ST-ZIP	TALLAHASSEE, FL 00000		2. 4 CITY	r-ST	- ZIP				
TITLE		☐ DELETE	3.1 TiTL1	E				Change	Addition
NAME			3.2 NAM	Æ					
STREET ADDRESS	s }		3.3 STRE	E1 A	DDRESS				
CITY-ST-ZIP	Į.		3.4. CITY	/- ST	T- Z IP				
TITLE		☐ DELE Y£	4.1 TITLE					Change	Addition
NAME			4. 2 NAN	Æ					
STREET ADDRESS	;		4,3 STRE	ET A	NDORESS				
CITY-ST-ZIP			4.4 CITY		l				
TITLE		DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAM	E					
STREET ADDRESS	<u>, </u>		5.3 STRE		DDRESS		4000025127 -05/06/9801015	(84	
CITY-ST-ZIP			5.4 CITY				-05/06/9801015	·U4b	
TITLE	 	DELETE	6.1 1/111		***		***150.00	Change	Addition
NAME			6.2 NAM						12
STREET ADDRESS	.		6.3 STRE		DORESS		l	(A)	CI_{k}
THE PROPERTY	· 1		0.0 0 111						

14. 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 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 truetee 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 attaching mith an address

6.4 CITY - ST - ZIP

MATURE Samuel Commence Training Games 4/30/

CR2E034 (10/97