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

Mailing Address 203 N. GADSDEN STREET

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F89376

OVERSEAS TRAVEL-CO.

Principal Place of Business

203 N. GADSDEN STREET

1997

PAN AMERICAN TRANSPORT, INC.

(0)

FILED Feb 07 1997 8:00am Secretary of State



HS TALLAMASSEE PL SZJUI		U8	-7037		
				<ol> <li>Date Incorporated or Qualified 07/06/1982</li> </ol>	3a. Date of Last Report 03/27/1996
2. Principa! Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21 1827 Transmit	ter Road		Terrace D	r · 59-2202138	Not Applicable
Suite Apt # etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State Panama City,	F1. 32404	City & State  Tallahass	ee, Fl 323	0 1 6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24 25		29	30		Yes No
9. Name and	Address of Current R	egistered Agent		10. Name and Address of New Re	gistered Agent
MCKENZIE, W. GI <del>-203 N GADSDEN</del> T <del>ALLAHASSE FL (</del>	<b>\$</b> †-		B3 14	Kenzie, W. Guy Jr. Address (P.O. Box Number is Not Acceptate 20 Golf Terrace Dr.	
			[84] City	llahassee, Fl. 3230 Llahassee, Fl.	FL   85   Zip Code   3 2 1 0 1
office or registered agent,	or both, in the State of		ites, the above-named authorized by the corp	corporation submits this statement for the proration's board of directors. I hereby acception	
SIGNATURE W. C.V	uckani.l.	-			Jan. 7. 1997
SIGNATURE Sagnar se Type of the			TE: Registered Agent signature		D) TE
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFIC	
THE ST	In Alle W	DELETE		President	Change Addition
NAME MCKENZIE				McKenzie, W. Guy Jr	
STREET ADDRESS 203 N GADS	EE; FL 00000			1420 Golf Terrace D	r.
	CC, TL WOOD	DELETE	D 4 WORLE	Callahassee, Fl. 32	3 O 1 X Change Addition
MAUPAINE	RDIGITTE R	E) Decerte		Secretary	_ , _
A44-44-64				McKenzie, Brigitte 1	
TALLALIACO	EE. FL 00000			1420 Golf Terrace D:	
CITY - ST - ZIP ALLEAT AGO	CL, IL 00000	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Tallahassee, Fl. 323	Change X Addition
NAME		L-J betere	3.2 NAME	DIRECTOR ERNEST SPIDNER	Thengo (sal vocation
STREET ADDRESS			3.3 STREET ADDRESS	1827 TRANSMITTER PO	
CHY-SI-ZIP			3.4. CITY-ST-ZIP	PANAMACITY, FL 324	s#
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY- ST-ZIF			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TOTLE		Change Addition
NAME			5.2 NAME		
STREET ACCIDESS			5.3 STREET ADDRESS		
CITY-ST-7IP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	711111.11111.11111.11111.11111.11111.1111	Change Addition
NAME			6.2 NAME	S <u>0</u> 000208	36392
STREET ADDRESS			6.3 STREET ADDRESS	20000208 -02/13/97010 ***330.00	0150387ス ヘノハ
City, St. 7IP			64 CITY - ST - 7IP	***330.00	VIO P

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 TYPE DOD BRINTED NAME OF BIOMING OFFICED OR OFFICE

2-6-97

Daytime Phone #