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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Apr 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G06211

(8)

**EXECUTIVE INCENTIVES & TRAVEL, INC.** 

| Principal Place of Business Mailing Addre 100 NW 12TH AVE. 100 NW 12TH   |  |  |   |  |  |                         |
|--|--|--|---|--|--|-------------------------|
| DEERFIELD BEACH FL 33442   |  | LEGAL DEPT   |   |  |  |                         |
|  |  | DEERFIELD BEACH FL 33442-1702<br>US                    |   | 3. Date Incorporated or Qualified 10/27/1982         | 3a. Date of Last Report 03/25/1996   | rt                      |
| , may  | lace of Business   | 2a. Mailing Address                                    |   | 4. FEI Number  | Applie   |                         |
| Suite, Apt   | # ota  | 26 Suite, Apt. #, etc.                                 |   | 59-2232364   | 60 75  | plicable                |
| 22   | #, U(U.  | 27   |   | 5. Certificate of Status Desired                     | \$8.75 Addit   |                         |
| City & State   | 0  | City & State   |   | 6. Election Campaign Financing                       | \$5.00 May   | v Ba                    |
| 3  |  | 28   |   | Trust Fund Contribution                              | ☐ Added to Fe  |                         |
| _Zφ<br>−r  | Country  | Z <sub>ip</sub>  | Country   | a. This corporation has liability for in             | . ~  | 3.032,                  |
| 4]   | 25  <br>9 Name and Address of Curro  | 29 ant Registered Agent                                | [30]  | Florida Statutes  10. Name and Address of New Reg    | Yes No   |                         |
| ^T   | CORPORATION SYSTEM   | on registered register                                 | 81 Name   | 10, realise and Address of Note 1105                 | and to regard  |                         |
|  | O S. PINE ISLAND ROAD  |  | OO Street Add   | (D.C. D. N N N                                       | I a \  |                         |
|  | NTATION FL 33324   |  | 82 Street Add   | dress (P.O. Box Number is Not Acceptable             | ie)  |                         |
|  | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |  | 83  |  |  |                         |
|  |  |  | 84 City   |  | 85 Zip Cod   |                         |
|  |  |  | J   |  | FL   S   Z   P G G G   |                         |
| office or r  |  | incitions of Caption CO7 ACAC C                        | Incide Chaliston  | • •  | •  |                         |
| agent. i a   | m familiar with, and accept the obli   | ·  | TE: Registered Agent signature requ   | ulred when reinstating)                              | DATE   |                         |
| agent. I a<br>SIGNATURE  | Signature Typed or conted name of registered a   | ·  |   | ulred when reinstating)  ADDITIONS/CHANGES TO OFFICE |  | 1 12                    |
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