1 of 2

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H84854

1. Entity Name

Midnight Sun Tours, Inc.

FILED

00 NOV 22 PM 3:08

SECRETARY OF STATE
TALLAHASSEE FLORIDA

100003473372--3

Principal Place of Business	Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
511 East Coast Street Suite, Apt. #, etc.	One Riverway Suite, Apt. #, etc. 500
City & State: Lake Worth, FL	City & State: Houston, TX
Zip: 33460 Country: USA	Zip: 77056 Country: USA

4. FEI Number: 59-2642791 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Corporation Service Company 1201 HAYS STREET, STE 105 TALLAHASSEE, FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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: BRIAN COURTNEY, ASST. V.P. DATE: 11/27/2000

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

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

FILE NOW!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Markku Konttinen 511 EAST COAST STREET LAKE WORTH, FL 33460 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	ACS Shayne A. Rosecrans ONE RIVERWAY, STE 500 HOUSTON, TX 77056 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVPS Robert E. Longo ONE RIVERWAY, STE500 HOUSTON, TX 77056 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LINDA BELL ONE RIVERWAY, STE 500 HOUSTON, TX 77056 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T STEPHANIE REYES ONE RIVERWAY, STE500 HOUSTON, TX 77056 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DCEO Frank Gallagher ONE RIVERWAY, STE 500 HOUSTON, TX 77056 ☐ Change ☒ Addition

CR2E034 (9/99)

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 Block 12 if changed, or on an attachment with an address, with all other empowered. KE

SIGNATURE: Shayne A. Rosecrans Shayne A. Rosecrans 11-17-2000 (713)8001764

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 864881 7111512

AUTHORIZATION :

COST LIMIT : $ 61.25 Patricia Pinto

ORDER DATE : October 16, 2000

ORDER TIME : 1:59 PM

ORDER NO. : 864881-015

CUSTOMER NO: 7111512

CUSTOMER: Ms. Courtney Heysquierdo
Coach Usa
One Riverway
Suite 500
Houston, TX 770561903

RECEIVED
00 NOV 21 PM 1:5
DIVISION OF CORPORATIONS
SUPERVISOR PICKED UP

ANNUAL REPORT FILING

NAME: MIDNIGHT SUN TOURS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: ~~Marissa Guerra~~ Janna Lawhon

EXAMINER'S INITIALS: _____