2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2001 8:00 am
Secretary of State
05-16-2001 90217 040 ***150.00

DOCUMENT # L87928

1. Entity Name
CRISSCROSS TOURS & IMPORTS, INC.

Principal Place of Business	Mailing Address
~~2471 MCMULLEN-BOOTH RD.~~ ~~SUITE 7~~ ~~CLEARWATER FL 34619~~ ~~US~~	2471 MCMULLEN BOOTH RD. SUITE 7 CLEARWATER FL 34619 US

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2729 S.R.580	2729 S.R 580
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Clearwater FL	City & State: Clearwater, FL
Zip: 33761 Country:	Zip: 33761 Country:

4. FEI Number 59-3016994 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GORIS, ROBIN G.
~~2471 MCMULLEN-BOOTH RD.~~ 2729 S.R. 580
~~SUITE 7~~
CLEARWATER FL ~~34619~~ 33761

7. Name and Address of New Registered Agent

Name: ~~Crisscross Tours & Imports, Inc.~~
Street Address (P.O. Box Number is Not Acceptable): 2729 S.R. 580
City: Clearwater FL Zip Code: 33761

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 ____________________ DATE
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, 2001 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	P GORIS, RIMOUN F. A. 5544 SSTALLION LAKE DR. PALM HARBOR FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V GORIS, ROBIN G. 5544 STALLION LAKE DR. PALM HARBOR FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/00)

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 like empowered.*

SIGNATURE: ____________________ 5/2/01 727/925-4595
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
Doc# L87928
76707

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 15, 2001

CRISSCROSS TOURS & IMPORTS, INC.
2729 SR 580
CLEARWATER, FL 33761 US

Subject: **CRISSCROSS TOURS & IMPORTS, INC.**

Reference Number: **L87928**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling $150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Florida law does not allow an entity to serve as its own registered agent. Designate a registered agent, other than the entity, with a street address in Florida. The agent must sign if this is a change from the registered agent previously filed with this office.

TO AVOID THE $400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

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ANNUAL REPORTS SECTION