

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000084689 1. Entity Name UNIGLOBE TRAVEL (U S SERVICES) INC.	
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Principal Place of Business 101 E KENNEDY BLVD SUITE 2000 TAMPA, FL 33602-5133	Mailing Address 1199 WEST PENDER STREET 900 VANCOUVER, BC V6E2R US
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01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2338759	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BEYER, DAVID A 101 E KENNEDY BLVD SUITE 2000 TAMPA, FL 33602-5133
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BARTRAM, TRACY 1199 WEST PENDER STREET, SUITE 900 VANCOUVER, BC V6E2R
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GARY, CHARLWOOD 1199 WEST PENDER STREET STE 900 VANCOUVER, BC V6E2R
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CHARLWOOD, MARTIN 1199 WEST PENDER STREET, SUITE 900 VANCOUVER, BC V6E2R
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

1100000117302
04/19/04-80014-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRACY BARTRAM 04/13/04 604-715-2622
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #