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**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT F STATE

Sandra B. Mort

Secretary of Sta

DIVISION OF CORPOR TIONS

DOCUMENT # P96000008899 (2)

TIA IARA TOUR AND TRADING COMPANY

Principal Place of Business 332 WINDFORD COURT

a.

Mailing Address

332 WINDFORD COURT

FILED Apr 15 1998 8:00am Secretary of State



WINTER GARDEN FL 34787 WINTER GARDEN FL 34787 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/25/1996 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For 11003 ASHBOURNE CIP. 59-3360448 Not Applicable 21 Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MENDONCA, IARA MARIA P 81 Name 332 WINDFORD COURT 82 Street Address (P.O. Box Number is Not Acceptable) **WINTER GARDEN FL 34787** 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of. Section 607.0506, Florida Statutes. SIGNATURE Signature, typed or prioted name of toor steroid against and title it approaches (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition DELETE Change TITLE 1.1 TOLE MENDONCA, IARA MARIA P NAME **1.2 NAME 832 WINDFORD COURT** STREET ADDRESS 1.3 STREET ADDRESS WINTER GARDEN FL 34787 CITY-ST-7IP 1.4 CITY-ST-7IP DELETE Change Addition TITLE 2.1 TITLE MENDONCA, MARCELLO 2.2 NAME **332 WINDFORD COURT** STREET ADDRESS 2.3 STREET ADDRESS **WINTER GARDEN FL 34787** CITY-ST-ZIP 2.4 CITY - S1 - ZIP DELETE Change Addition TITEF 31 TITLE COSTA, ROSANA M 3.2 NAME 11003 ASHBOURNE CIRCLE STREET ADDRESS 3 3 STREET ADDRESS TAMPA FL 33624-5201 CITY-ST-ZIP 3 4. CITY - S1 - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change Addition 5.1 TH LE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 THLE ☐ Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. Thereby certify that the information supplied with this indicated on this annual report or supplemental annual does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information s true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an Inpowered to pyrcute this report as required by Chapter 607, Florida Statutes: and that my name appears in

officer or director of the corporat Block 12 or Block 13 if changed

(813)963-170A